

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
New York State Democratic Committee

ADDRESS (number and street) 461 Park Avenue South, 10th Floor  
 Check if different than previously reported. (ACC)  
New York NY 10016

2. **FEC IDENTIFICATION NUMBER** C00143230  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer David Alpert  
Signature of Treasurer Electronically Filed by David Alpert Date 10 20 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

Please be advised that the wages reported on Schedule H4 were for employees who spent 25% or less of their time during the reporting period in connection with federal elections or on Federal Election Activity and, as such, these wages can be paid as administrative expenses. Fringe benefits may continue to be reported on Schedule H4.

A. Form/Schedule : **F3XN**

Transaction ID :

With respect to the 2010 October Monthly Report, please note the following relative to Schedule A, Line 12: There were no transfers received from the Democratic National Committee during this reporting period. There are funds, however, retained in the Democratic National Committee account and these funds will be transferred to the New York State Democratic Committee sometime in 2010. This explains why the memo entries for Schedule A, Line 12 for the third quarter of 2010 (August, September and October Monthly Reports) are higher than the transfers received during this same period; the Committee discloses memo entries quarterly, not monthly, based upon contributions received by the Democratic National Committee during that quarter.

A. Form/Schedule : **F3XN**

Transaction ID :

Please be advised that the amounts received by the Committee on Line 17 were for access to the Committee's voter file. The amounts charged reflect the prevailing fair market value for access to such data and were based on a survey of comparable vendors.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
New York State Democratic Committee

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		32912.17
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	203980.85									
(c) Total Receipts (from Line 19) .....	1061087.17	2424807.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1265068.02	2457719.37								
7. Total Disbursements (from Line 31) .....	964152.30	2163805.34								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	300915.72	293914.03								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	26107.19									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
New York State Democratic Committee

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	74450.00	234850.00
(ii) Unitemized .....	120.00	2130.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	74570.00	236980.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	286000.00	360500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	360570.00	597480.00
12. Transfers From Affiliated/Other Party Committees .....	556273.88	921934.14
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	26725.78	94979.30
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	15000.00	194107.10
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	102517.51	616306.66
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	102517.51	616306.66
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1061087.17	2424807.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	958569.66	1808500.54

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	39658.11	201771.95
(ii) Non-Federal Share.....	117539.05	639110.33
(b) Other Federal Operating Expenditures.....	13301.10	57600.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	170498.26	898483.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	5375.00	5398.60
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	52400.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	788279.04	1207523.63
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	788279.04	1207523.63
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	964152.30	2163805.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	846613.25	1524695.01

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	360570.00	597480.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	360570.00	597480.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	52959.21	259372.78
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	26725.78	94979.30
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26233.43	164393.48

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 190  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Francis Greenburger

Mailing Address 55 5th Ave  
Fl 15

City State Zip Code  
New York NY 10003-4301

FEC ID number of contributing federal political committee. **C**

Name of Employer Time Equities, Inc. Occupation Real Estate Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2010

**Transaction ID:** C3124573

Amount of Each Receipt this Period  
4000.00

**B.**

Full Name (Last, First, Middle Initial)  
Elaine F. Greene

Mailing Address 304 Troy Road

City State Zip Code  
Rochester NY 14618

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Psychologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

**Transaction ID:** C3124618

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Pamela B. Hall

Mailing Address 21 Ridge Rd

City State Zip Code  
Dover Plains NY 12522

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2010

**Transaction ID:** C3134506

Amount of Each Receipt this Period  
1250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5750.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 190  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) Lowell Harwood		Date of Receipt MM / DD / YYYY 09 / 13 / 2010
Mailing Address 26 Journal Square, Suite 804		<b>Transaction ID:</b> C3134436
City Jersey City	State NJ	Zip Code 07306
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 700.00
Name of Employer Harwood Group LLC	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

**B.**

Full Name (Last, First, Middle Initial) John E. Hooker		Date of Receipt MM / DD / YYYY 09 / 03 / 2010
Mailing Address 3 Gleason Court - North Haven		<b>Transaction ID:</b> C3124252
City Sag Harbor	State NY	Zip Code 11963
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Nancy Kohlberg		Date of Receipt MM / DD / YYYY 09 / 28 / 2010
Mailing Address 111 Radio Circle		<b>Transaction ID:</b> C3124812
City Mount Kisco	State NY	Zip Code 10549
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10000.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>11200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 190  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) Eric Laufer		Date of Receipt MM / DD / YYYY 09 / 14 / 2010
Mailing Address 32 Washington Square West, 5W		<b>Transaction ID:</b> C3124415
City New York	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Laufer Wind Project	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**B.**

Full Name (Last, First, Middle Initial) Steven M Laufer		Date of Receipt MM / DD / YYYY 09 / 27 / 2010
Mailing Address 2727 Palisade Avenue, Apt. 16F		<b>Transaction ID:</b> C3124821
City Bronx	State NY	Zip Code 10463-1029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer NYU	Occupation Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

**C.**

Full Name (Last, First, Middle Initial) Michael J. Malik		Date of Receipt MM / DD / YYYY 09 / 28 / 2010
Mailing Address 2211 Woodward Avenue, 10th Floor		<b>Transaction ID:</b> C3124792
City Detroit	State MI	Zip Code 48201-3467
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer MJM Enterprises	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	25000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 190  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Peter Mensch

Mailing Address 729 7th Avenue, 16th Floor

City State Zip Code  
New York NY 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Q Prime Inc Personal Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2010

**Transaction ID:** C3124839

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Laura B Sillerman

Mailing Address 157 E 70th St

City State Zip Code  
New York NY 10021-5109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Tomorrow Foundation Philanthropist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2010

**Transaction ID:** C3124840

Amount of Each Receipt this Period  
10000.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Sillerman

Mailing Address 157 E 70th St

City State Zip Code  
New York NY 10021-5109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Sillerman Companies President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 27 / 2010

**Transaction ID:** C3124848

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 190
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) Susan Spear		Date of Receipt
Mailing Address 36 Astor Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 01 / 2010
City	State	Zip Code
Mahopac	NY	10541-3700
FEC ID number of contributing federal political committee.		Transaction ID: C3124223
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 1500.00
Name of Employer MCI	Occupation Director, Consumer Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 1500.00	

**B.**

Full Name (Last, First, Middle Initial) Diane Wohl		Date of Receipt
Mailing Address 141 Heather Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2010
City	State	Zip Code
Mill Neck	NY	11765
FEC ID number of contributing federal political committee.		Transaction ID: C3124255
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 6000.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 6360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 74450.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 190  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 Massachusetts Ave. NW  
8th Floor

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 28 / 2010  
**Transaction ID:** C3124789  
Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
ALL NEW SOLAR, WIND & EFFICIENCY RESOURCES PAC (AN)

Mailing Address 499 S. Capitol St., SW  
Suite 404

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00451278

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 09 / 14 / 2010  
**Transaction ID:** C2985624  
Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF TEACHERS AFL-CIO COMMITTEE

Mailing Address 555 New Jersey Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 02 / 2010  
**Transaction ID:** C3124228  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
CWA-COPE PCC

Mailing Address 501 Third Street, NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 13 / 2010

Transaction ID: C3124358

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 Massachusetts Ave., NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 28 / 2010

Transaction ID: C3124796

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE

Mailing Address 607 14th Street NW Suite 800

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 27 / 2010

Transaction ID: C3124690

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

10000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
NEW YORK STATE LABORERS' INTERNATIONAL UNION OF NO  
Mailing Address 18 Corporate Woods Blvd.  
City Albany State NY Zip Code 12211  
FEC ID number of contributing federal political committee. **C** C00220566  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 09 / 27 / 2010  
Transaction ID: C3134488  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
RETAIL, WHOLESALE & DEPT. STORE UNION CMTE ON POLI  
Mailing Address 30 EAST 29TH STREET  
City NEW YORK State NY Zip Code 10016  
FEC ID number of contributing federal political committee. **C** C00174011  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 09 / 28 / 2010  
Transaction ID: C3124801  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS  
Mailing Address PO Box 437  
City Farmingville State NY Zip Code 11738  
FEC ID number of contributing federal political committee. **C** C00375618  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 269800.00  
Date of Receipt 09 / 03 / 2010  
Transaction ID: C3131882  
Amount of Each Receipt this Period 69000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 79000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 190  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

FEC ID number of contributing federal political committee. **C** C00375618

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269800.00

Date of Receipt  
MM / DD / YYYY  
09 / 13 / 2010

**Transaction ID:** C3131884

Amount of Each Receipt this Period  
71000.00

**B.**

Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

FEC ID number of contributing federal political committee. **C** C00375618

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269800.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2010

**Transaction ID:** C3131885

Amount of Each Receipt this Period  
70000.00

**C.**

Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

FEC ID number of contributing federal political committee. **C** C00375618

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269800.00

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2010

**Transaction ID:** C3131886

Amount of Each Receipt this Period  
44000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	185000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	286000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Arthur Alowitz  
Mailing Address 9 Coyote Ln  
City Troy State NY Zip Code 12180-7805  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 213.75  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126558  
Amount of Each Receipt this Period 213.75  
**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Frank Barth  
Mailing Address 48 Main St Apt 111  
City Silver Creek State NY Zip Code 14136-1477  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 295.00  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126562  
Amount of Each Receipt this Period 95.00  
**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Marcel G. Berard  
Mailing Address 34 Commerce Street, Apt. 1W  
City New York State NY Zip Code 10014  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 231.75  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126565  
Amount of Each Receipt this Period 231.75  
**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Donald Brister

Mailing Address 69 Highland Avenue

City State Zip Code  
Binghamton NY 13905-4124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
State Univ of NY Librarian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 118.75

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126568  
Amount of Each Receipt this Period: 118.75

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Pamela Byrd

Mailing Address 205 W End Ave Apt 15T

City State Zip Code  
New York NY 10023-4822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dynamic Credit Partners LLC Programmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126569  
Amount of Each Receipt this Period: 95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 543463.62

Date of Receipt: 09 / 13 / 2010  
Transaction ID: C3131856  
Amount of Each Receipt this Period: 3419.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3419.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 190

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 13 / 2010

Transaction ID: C3131860

Amount of Each Receipt this Period

1793.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 13 / 2010

Transaction ID: C3131863

Amount of Each Receipt this Period

69633.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 13 / 2010

Transaction ID: C3131868

Amount of Each Receipt this Period

4258.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

75684.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 13 / 2010

Transaction ID: C3131872

Amount of Each Receipt this Period

10934.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 13 / 2010

Transaction ID: C3131875

Amount of Each Receipt this Period

5800.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2010

Transaction ID: C3131857

Amount of Each Receipt this Period

4006.00

**SUBTOTAL** of Receipts This Page (optional) .....

20740.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2010

Transaction ID: C3131861

Amount of Each Receipt this Period

1405.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2010

Transaction ID: C3131864

Amount of Each Receipt this Period

3968.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2010

Transaction ID: C3131869

Amount of Each Receipt this Period

3588.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

8961.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

**Transaction ID:** C3131873

Amount of Each Receipt this Period  
5799.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

**Transaction ID:** C3131876

Amount of Each Receipt this Period  
5800.00

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	1	0

**Transaction ID:** C3131878

Amount of Each Receipt this Period  
72000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **83599.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** C3131858

Amount of Each Receipt this Period  
4093.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** C3131862

Amount of Each Receipt this Period  
1405.00

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** C3131865

Amount of Each Receipt this Period  
10246.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15744.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	1	0

**Transaction ID:** C3131870

Amount of Each Receipt this Period  
7307.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	1	0

**Transaction ID:** C3131874

Amount of Each Receipt this Period  
8851.00

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	1	0

**Transaction ID:** C3131879

Amount of Each Receipt this Period  
5800.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **21958.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	1	0

**Transaction ID:** C3131866

Amount of Each Receipt this Period  
50000.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	1	0

**Transaction ID:** C3131842

Amount of Each Receipt this Period  
1405.00

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	1	0

**Transaction ID:** C3131859

Amount of Each Receipt this Period  
4131.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **55536.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt																					
	Mailing Address 430 South Capitol Street SE 2nd Floor		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		3	0		2	0	1	0														
	City State Zip Code Washington DC 20003		<b>Transaction ID:</b> C3131867																					
FEC ID number of contributing federal political committee. <b>C</b> C00000935		Amount of Each Receipt this Period																						
Name of Employer Occupation		<table border="1"> <tr> <td colspan="10">3968.00</td> </tr> </table>		3968.00																				
3968.00																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		<table border="1"> <tr> <td colspan="10">543463.62</td> </tr> </table>		543463.62																				
543463.62																								

<b>B.</b>	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt																					
	Mailing Address 430 South Capitol Street SE 2nd Floor		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		3	0		2	0	1	0														
	City State Zip Code Washington DC 20003		<b>Transaction ID:</b> C3131871																					
FEC ID number of contributing federal political committee. <b>C</b> C00000935		Amount of Each Receipt this Period																						
Name of Employer Occupation		<table border="1"> <tr> <td colspan="10">4310.00</td> </tr> </table>		4310.00																				
4310.00																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		<table border="1"> <tr> <td colspan="10">543463.62</td> </tr> </table>		543463.62																				
543463.62																								

<b>C.</b>	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt																					
	Mailing Address 430 South Capitol Street SE 2nd Floor		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		3	0		2	0	1	0														
	City State Zip Code Washington DC 20003		<b>Transaction ID:</b> C3131880																					
FEC ID number of contributing federal political committee. <b>C</b> C00000935		Amount of Each Receipt this Period																						
Name of Employer Occupation		<table border="1"> <tr> <td colspan="10">16920.00</td> </tr> </table>		16920.00																				
16920.00																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		<table border="1"> <tr> <td colspan="10">543463.62</td> </tr> </table>		543463.62																				
543463.62																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"> <tr> <td>25198.00</td> </tr> </table>	25198.00
25198.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"> <tr> <td> </td> </tr> </table>	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543463.62

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	1	0

**Transaction ID:** C3135115

Amount of Each Receipt this Period  
14865.00

**B.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
156281.91

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	1	0

**Transaction ID:** C3124232

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
156281.91

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	9	/	2	0	1	0

**Transaction ID:** C3134583

Amount of Each Receipt this Period  
3220.00

In-Kind: Voter File Access

**SUBTOTAL** of Receipts This Page (optional) ..... ► **23085.00**

**TOTAL** This Period (last page this line number only) ..... ►

B. Form/Schedule : **SA12**  
Transaction ID : **C3124232**

The \$5,000.00 transfer on Schedule A, Line 12 from the Democratic National Committee reflects a party transfer.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Harry C. Doolittle

Mailing Address 43 Crane Rd

City State Zip Code  
Scarsdale NY 10583

FEC ID number of contributing federal political committee. **C**

Name of Employer Exclusively Misookinc Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126621

Amount of Each Receipt this Period  
475.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Harrison Freer

Mailing Address 28 Garrison Road

City State Zip Code  
Queensbury NY 12804-2035

FEC ID number of contributing federal political committee. **C**

Name of Employer Freer Ideas Occupation Manager Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126636

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Hal Friedman

Mailing Address 238 6th Avenue Apt 1

City State Zip Code  
Brooklyn NY 11215

FEC ID number of contributing federal political committee. **C**

Name of Employer State Insurance Fund Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 709.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126643

Amount of Each Receipt this Period  
209.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI  
Mailing Address PO Box 74  
City State Zip Code  
Syracuse NY 13214  
FEC ID number of contributing federal political committee. **C** C00417550  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 77500.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 03 / 2010  
Transaction ID: C3131890  
Amount of Each Receipt this Period 20000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI  
Mailing Address PO Box 74  
City State Zip Code  
Syracuse NY 13214  
FEC ID number of contributing federal political committee. **C** C00417550  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 77500.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2010  
Transaction ID: C3131891  
Amount of Each Receipt this Period 20000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI  
Mailing Address PO Box 74  
City State Zip Code  
Syracuse NY 13214  
FEC ID number of contributing federal political committee. **C** C00417550  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 77500.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2010  
Transaction ID: C3131892  
Amount of Each Receipt this Period 10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 50000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI

Mailing Address PO Box 74

City State Zip Code  
Syracuse NY 13214

FEC ID number of contributing federal political committee. **C** C00417550

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
77500.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2010

**Transaction ID:** C3131893

Amount of Each Receipt this Period  
20000.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas Galvin

Mailing Address 159 Saratoga Blvd

City State Zip Code  
Saratoga Springs NY 12866-9195

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
95.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** C3126654

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Paul Garnett

Mailing Address 185-16 Galway Avenue

City State Zip Code  
Saint Albans NY 11412-2924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Medco Health Solutions Database Administrations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.75

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** C3126661

Amount of Each Receipt this Period  
213.75

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **20000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 190
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Elaine Graham		Date of Receipt
	Mailing Address 45 West 10th Street Apt 5E		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2010
	City	State	Zip Code
	New York	NY	10011-8763
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C3126663
Name of Employer Information Requested		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/> 280.25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<b>[MEMO ITEM]</b> * NY Party Victory Fund
		<input type="text"/> 280.25	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph Green		Date of Receipt
	Mailing Address 950 Union Avenue, Apt. 7R		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2010
	City	State	Zip Code
	Bronx	NY	10459
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C3126664
Name of Employer N/A		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/> 118.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<b>[MEMO ITEM]</b> * NY Party Victory Fund
		<input type="text"/> 522.50	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph Green		Date of Receipt
	Mailing Address 950 Union Avenue, Apt. 7R		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 30 / 2010
	City	State	Zip Code
	Bronx	NY	10459
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C3126666
Name of Employer N/A		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/> 190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<b>[MEMO ITEM]</b> * NY Party Victory Fund
		<input type="text"/> 522.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 0.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Rosalind Groskin  
Mailing Address 154 Crescent Lane  
City Roslyn Heights State NY Zip Code 11577-1552  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 190.00  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126671  
Amount of Each Receipt this Period 190.00  
[MEMO ITEM]  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Eugene M Laks  
Mailing Address 363 Orchard Street  
City Delmar State NY Zip Code 12054  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 237.50  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126674  
Amount of Each Receipt this Period 237.50  
[MEMO ITEM]  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Lois Levine  
Mailing Address 101 Clark Street #6  
City Brooklyn State NY Zip Code 11201-2746  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 190.00  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126675  
Amount of Each Receipt this Period 95.00  
[MEMO ITEM]  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Lois Levine

Mailing Address 101 Clark Street  
#6

City State Zip Code  
Brooklyn NY 11201-2746

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126677  
Amount of Each Receipt this Period: 95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
WILLIAM LLOYD

Mailing Address 245 W 107TH ST APT 16C

City State Zip Code  
NEW YORK NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer SETTLEMENT HEALTH Occupation PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126679  
Amount of Each Receipt this Period: 475.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Ed Lontscharitsch

Mailing Address 4211 Corporal Kennedy Street

City State Zip Code  
Bayside NY 11361-2764

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Electro Mechanic3

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126684  
Amount of Each Receipt this Period: 95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Ed Lontscharitsch

Mailing Address 4211 Corporal Kennedy Street

City State Zip Code  
Bayside NY 11361-2764

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Electro Mechanic3

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: C3126685

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Marianne Lowenthal

Mailing Address 25 Sutton Place South

City State Zip Code  
New York NY 10022-2441

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation  
Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: C3126691

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
William Mason

Mailing Address 1318 Metcalf Ave

City State Zip Code  
Bronx NY 10472-1704

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation  
Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

Transaction ID: C3126695

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
William Mason  
 Mailing Address 1318 Metcalf Ave  
 City State Zip Code  
Bronx NY 10472-1704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 190.00  
 Date of Receipt: 09 / 30 / 2010  
**Transaction ID:** C3126696  
 Amount of Each Receipt this Period: 95.00  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
RONALD MEDIATORE  
 Mailing Address 16 LOU CT  
 City State Zip Code  
HOLBROOK NY 11741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
GEB ENGINEERS P C CIVIL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 142.50  
 Date of Receipt: 09 / 30 / 2010  
**Transaction ID:** C3126703  
 Amount of Each Receipt this Period: 47.50  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
RONALD MEDIATORE  
 Mailing Address 16 LOU CT  
 City State Zip Code  
HOLBROOK NY 11741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
GEB ENGINEERS P C CIVIL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 142.50  
 Date of Receipt: 09 / 30 / 2010  
**Transaction ID:** C3126705  
 Amount of Each Receipt this Period: 47.50  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
RONALD MEDIATORE

Mailing Address 16 LOU CT

City State Zip Code  
HOLBROOK NY 11741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GEB ENGINEERS P C CIVIL ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 142.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126707

Amount of Each Receipt this Period  
47.50

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Edmund Miller

Mailing Address 43-55 Kissena Blvd  
Apt 3D

City State Zip Code  
Flushing NY 11355

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Long Island U College Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126715

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Robert Owens

Mailing Address 149 Seminole Way

City State Zip Code  
Rochester NY 14618-1346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
State Univ of NY College Prof

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126723

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Poreba

Mailing Address 430 East 6th Street  
Apt 14C

City State Zip Code  
New York NY 10009-6443

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126726

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Rita Rasmussen

Mailing Address 9108 Colonial Road  
Apt D2

City State Zip Code  
Brooklyn NY 11209-6129

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126741

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
William Reinhardt

Mailing Address 1613 New Scotland Rd

City State Zip Code  
Slingerlands NY 12159

FEC ID number of contributing federal political committee. **C**

Name of Employer New York State Occupation Energy Researcher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3126747

Amount of Each Receipt this Period  
285.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
CHARLES RICHARDSON

Mailing Address 239 PARKSIDE DR

City State Zip Code  
SUFFERN NY 10901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Town of Orangetown Finance Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126750  
Amount of Each Receipt this Period: 190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Stephen Schmitt

Mailing Address 220 Bonnie Brae Avenue

City State Zip Code  
Rochester NY 14618-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Travelers Insurance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126752  
Amount of Each Receipt this Period: 190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Stephen Schmitt

Mailing Address 220 Bonnie Brae Avenue

City State Zip Code  
Rochester NY 14618-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Travelers Insurance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3126754  
Amount of Each Receipt this Period: 47.50

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Bob Schwarz  
Mailing Address 8 Lilla Lane  
City East Hampton State NY Zip Code 11937-1187  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 190.00  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126758  
Amount of Each Receipt this Period 190.00  
[MEMO ITEM]  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
Cushing Strout  
Mailing Address 369 Savage Farm Drive  
City Ithaca State NY Zip Code 14850-2155  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 95.00  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126764  
Amount of Each Receipt this Period 95.00  
[MEMO ITEM]  
\* NY Party Victory Fund

**C.** Full Name (Last, First, Middle Initial)  
Lafayette Tann  
Mailing Address 99 Fort Washington Avenue Apt 2A  
City New York State NY Zip Code 10032-4670  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 190.00  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3126769  
Amount of Each Receipt this Period 190.00  
[MEMO ITEM]  
\* NY Part Victory Fund

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Harold W. Watts

Mailing Address 144 Bay Avenue

City State Zip Code  
Greenport NY 11944

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2010

**Transaction ID:** C3126773

Amount of Each Receipt this Period  
95.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B.** Full Name (Last, First, Middle Initial)  
ASDC Dollars for Democrats

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00073791

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 31000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 01 / 2010

**Transaction ID:** C3124217

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Frank Barth

Mailing Address 48 Main St Apt 111

City State Zip Code  
Silver Creek NY 14136-1477

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 19 / 2010

**Transaction ID:** C3125892

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5000.00**

**TOTAL** This Period (last page this line number only) ..... ►

B. Form/Schedule : **SA12**

Transaction ID : **C3124217**

With respect to the 2010 October Monthly Report, please note the following relative to Schedule A, Line 12: Transfers received from Dollars for Democrats during September, 2010 reflect contributions received by Dollars for Democrats during the 2010 August Monthly, September Monthly and October Monthly reporting periods and retained by Dollars for Democrats until transferred. This explains why the memo entries for the 2010 October Monthly Report are higher than the transfers received during the 2010 October Monthly Report since the Committee discloses memo schedules on a quarterly basis based upon contributions received by Dollars for Democrats.

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Frank Barth

Mailing Address 48 Main St Apt 111

City State Zip Code  
Silver Creek NY 14136-1477

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	0

Transaction ID: C3125896

Amount of Each Receipt this Period

100.00
--------

**[MEMO ITEM]**

\* Dollars for Democrats

**B.**

Full Name (Last, First, Middle Initial)  
GWYNETH BEARD

Mailing Address 62 SKIMHAMPTON RD

City State Zip Code  
EAST HAMPTON NY 11937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Transaction ID: C3125919

Amount of Each Receipt this Period

210.00
--------

**[MEMO ITEM]**

\* Dollars for Democrats

**C.**

Full Name (Last, First, Middle Initial)  
Richard Cotton

Mailing Address 1185 Park Avenue  
Apt 8A

City State Zip Code  
New York NY 10128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NBC Universal Lawyer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	0

Transaction ID: C3125945

Amount of Each Receipt this Period

250.00
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**[MEMO ITEM]**

\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional) .....

0.00
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL Friedman

Mailing Address 12 Old Mamaroneck Rd.,  
Apt. 5D

City State Zip Code  
WHITE PLAINS NY 10605-2037

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation SOCIAL WORK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY  
07 / 12 / 2010

Transaction ID: C3125998

Amount of Each Receipt this Period 30.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL Friedman

Mailing Address 12 Old Mamaroneck Rd.,  
Apt. 5D

City State Zip Code  
WHITE PLAINS NY 10605-2037

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation SOCIAL WORK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY  
08 / 16 / 2010

Transaction ID: C3126000

Amount of Each Receipt this Period 60.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL Friedman

Mailing Address 12 Old Mamaroneck Rd.,  
Apt. 5D

City State Zip Code  
WHITE PLAINS NY 10605-2037

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation SOCIAL WORK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY  
08 / 30 / 2010

Transaction ID: C3126003

Amount of Each Receipt this Period 30.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 190  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
John Garrett

Mailing Address 15 Mathew Drive

City State Zip Code  
Fairport NY 14450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Construction Link Programmer Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2010

Transaction ID: C3126106

Amount of Each Receipt this Period  
230.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B.**

Full Name (Last, First, Middle Initial)  
Adelaide P P. Gomer

Mailing Address 513 Wyckoff Rd

City State Zip Code  
Ithaca NY 14850-2309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Park Foundation Trustee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2010

Transaction ID: C3125858

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
\* Dollars For Democrats

**C.**

Full Name (Last, First, Middle Initial)  
Adelaide P P. Gomer

Mailing Address 513 Wyckoff Rd

City State Zip Code  
Ithaca NY 14850-2309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Park Foundation Trustee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2010

Transaction ID: C3125866

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
RAYMOND J NEWLAND

Mailing Address 575 S 15TH ST

City LINDENHURST State NY Zip Code 11757

FEC ID number of contributing federal political committee. **C**

Name of Employer LOCAL 138 Occupation CONSTRUCTION

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY  
07 / 28 / 2010

Transaction ID: C3126166

Amount of Each Receipt this Period: 50.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B.** Full Name (Last, First, Middle Initial)  
RAYMOND J NEWLAND

Mailing Address 575 S 15TH ST

City LINDENHURST State NY Zip Code 11757

FEC ID number of contributing federal political committee. **C**

Name of Employer LOCAL 138 Occupation CONSTRUCTION

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY  
09 / 07 / 2010

Transaction ID: C3126178

Amount of Each Receipt this Period: 50.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**C.** Full Name (Last, First, Middle Initial)  
KATHLEEN PARKER

Mailing Address 1170 5TH AVE APT 6-B

City NEW YORK State NY Zip Code 10029

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 547.00

Date of Receipt: MM / DD / YYYY  
08 / 16 / 2010

Transaction ID: C3126231

Amount of Each Receipt this Period: 100.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
KATHLEEN PARKER

Mailing Address 1170 5TH AVE APT 6-B

City State Zip Code  
NEW YORK NY 10029

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 547.00

Date of Receipt: 08 / 16 / 2010  
Transaction ID: C3126232  
Amount of Each Receipt this Period: 100.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B.** Full Name (Last, First, Middle Initial)  
JAMES RANCK

Mailing Address 100 BANK ST., APT. 4D

City State Zip Code  
NEW YORK NY 10014

FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSITY OF NY Occupation PROFESSOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 07 / 12 / 2010  
Transaction ID: C3126236  
Amount of Each Receipt this Period: 400.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**C.** Full Name (Last, First, Middle Initial)  
THOMAS ROWE

Mailing Address 21 WEDDING BELL LN

City State Zip Code  
MAPLECREST NY 12454

FEC ID number of contributing federal political committee. **C**

Name of Employer The Triad Group LLC Occupation Insurance Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 26 / 2010  
Transaction ID: C3126241  
Amount of Each Receipt this Period: 200.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
SHEILA SCHOENFELD

Mailing Address 9201 SHORE RD # 507

City State Zip Code  
BROOKLYN NY 11209

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 07 / 2010

Transaction ID: C3126243

Amount of Each Receipt this Period: 250.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B.** Full Name (Last, First, Middle Initial)  
David Smiley

Mailing Address 301 West 108th Street, Apt. 8A

City State Zip Code  
New York NY 10025

FEC ID number of contributing federal political committee. **C**

Name of Employer Barnard College Occupation College Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 20 / 2010

Transaction ID: C3126253

Amount of Each Receipt this Period: 1000.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**C.** Full Name (Last, First, Middle Initial)  
ASDC Dollars for Democrats - Unitemized

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00073791

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2560.00

Date of Receipt: 09 / 01 / 2010

Transaction ID: CZ3124217

Amount of Each Receipt this Period: 2560.00

**[MEMO ITEM]**  
\*

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
GRASSROOTS VICTORY FUND

Mailing Address 15 WEST 26TH STREET SUITE 4R

City State Zip Code  
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C** C00485532

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
164149.88

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	7	/	2	0	1	0

**Transaction ID:** C3124820

Amount of Each Receipt this Period  
63443.06

**B.** Full Name (Last, First, Middle Initial)  
Jane Bergner

Mailing Address 5653 Bent Branch Road

City State Zip Code  
Bethesda MD 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	1	0

**Transaction ID:** C3129056

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
J. Darius Bikoff

Mailing Address 1720 Whitestone Expressway Suite 403

City State Zip Code  
Whitestone NY 11357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Unemployed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	1	0

**Transaction ID:** C3129088

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► **63443.06**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Jill Bikoff

Mailing Address 1720 Whitestone Expressway  
Suite 403

City State Zip Code  
Whitestone NY 11357

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Unemployed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 07 / 2010

**Transaction ID:** C3129075

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Alexander Durst

Mailing Address 413 West 43rd Street

City State Zip Code  
New York NY 10036

FEC ID number of contributing federal political committee. **C**

Name of Employer Durst Organization Occupation VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 07 / 2010

**Transaction ID:** C3129066

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Helena Durst

Mailing Address 413 West 43rd Street

City State Zip Code  
New York NY 10036

FEC ID number of contributing federal political committee. **C**

Name of Employer Durst Organization Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 07 / 2010

**Transaction ID:** C3129060

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Brett Howard

Mailing Address 80 Irving Place

City State Zip Code  
New York NY 10003

FEC ID number of contributing federal political committee. **C**

Name of Employer Peapod Company Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 0 / 2 0 1 0

**Transaction ID:** C3129110

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Stuart Kahn

Mailing Address 2434 Route 9G

City State Zip Code  
Staatsburg NY 12580

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 8 / 2 0 1 0

**Transaction ID:** C3129094

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Wendy Mackenzie

Mailing Address 829 Park Ave.

City State Zip Code  
New York NY 10021-2846

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Public Affairs Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 0 7 / 2 0 1 0

**Transaction ID:** C3129068

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Pfizer PAC

Mailing Address 235 East 42nd Street

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 20 / 2010

Transaction ID: C3129113

Amount of Each Receipt this Period

3500.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan Shiller

Mailing Address 17 East 75th Street

City State Zip Code  
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 20 / 2010

Transaction ID: C3129097

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**C.**

Full Name (Last, First, Middle Initial)  
Donald J. Trump

Mailing Address 725 5th Avenue

City State Zip Code  
New York NY 10022-2519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Trump Organization President/Real Estate Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 20 / 2010

Transaction ID: C3129104

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Leon Wagner

Mailing Address 300 Park Avenue, 25th Floor

City State Zip Code  
New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Golden Tree Asset Management  
Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 07 / 2010

**Transaction ID:** C3129071

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
GRASSROOTS VICTORY FUND

Mailing Address 15 WEST 26TH STREET SUITE 4R

City State Zip Code  
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C** C00485532

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
164149.88

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2010

**Transaction ID:** C3124856

Amount of Each Receipt this Period  
83906.82

**C.** Full Name (Last, First, Middle Initial)  
Robert A. Belfer

Mailing Address 767 5th Ave  
Fl 46

City State Zip Code  
New York NY 10153-0023

FEC ID number of contributing federal political committee. **C**

Name of Employer Belfer Management  
Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 09 / 2010

**Transaction ID:** C3128996

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► **83906.82**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Stephen Berger

Mailing Address 1050 Park Ave

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Odyssey Investment Partners, L.L.C. Financial Ex

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

**Transaction ID:** C3129020

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Jane Bergner

Mailing Address 5653 Bent Branch Road

City State Zip Code  
Bethesda MD 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2010

**Transaction ID:** C3128936

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Stuart Coleman

Mailing Address 2000 Broadway  
Apt 26B

City State Zip Code  
New York NY 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Strock & Strock & Lavan LLP Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

**Transaction ID:** C3129035

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Harold Fetner

Mailing Address 115 Westwood Drive

City State Zip Code  
Mount Kisco NY 10549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Durst Fetner Residential Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 1 0

Transaction ID: C3128969

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**B.**

Full Name (Last, First, Middle Initial)  
Lynne Flexner

Mailing Address 29 East 4th Street

City State Zip Code  
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
9600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 1 0

Transaction ID: C3129044

Amount of Each Receipt this Period

9600.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**C.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF CULTURAL INSTITUTIONS FEDERAL PAC

Mailing Address 19 DOVE STREET

City State Zip Code  
ALBANY NY 12210

FEC ID number of contributing federal political committee. **C** C00397901

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
3700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 1 0

Transaction ID: C3128527

Amount of Each Receipt this Period

3700.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Francis Greenburger

Mailing Address 55 5th Ave  
Fl 15

City State Zip Code  
New York NY 10003-4301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Time Equities, Inc. Real Estate Developer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2010

**Transaction ID:** C3128540

Amount of Each Receipt this Period  
3500.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**B.** Full Name (Last, First, Middle Initial)  
John Gutleber

Mailing Address N/A

City State Zip Code  
Manhasset NY 11030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Castanga Realty Co Information Requested

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2010

**Transaction ID:** C3128536

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**C.** Full Name (Last, First, Middle Initial)  
Robert Heckart

Mailing Address 1021 Rock Rimmon Rd

City State Zip Code  
Stamford CT 06903-1212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2010

**Transaction ID:** C3128943

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund  
2010

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Hurry

Mailing Address 41 Landing Drive

City Dobbs Ferry State NY Zip Code 10522

FEC ID number of contributing federal political committee. **C**

Name of Employer Wilkie, Farr & Gallagher Occupation Ghief Legal Personnel Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 16 / 2010  
**Transaction ID:** C3129016  
 Amount of Each Receipt this Period 2500.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Victor A. Kovner

Mailing Address 27 W 67th Street

City New York State NY Zip Code 10023-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer Davis Wright Tremaine Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 05 / 2010  
**Transaction ID:** C3128945  
 Amount of Each Receipt this Period 1000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Patricia Lynch Ludman

Mailing Address 66 Hilltop Dr

City Chappaqua State NY Zip Code 10514-1917

FEC ID number of contributing federal political committee. **C**

Name of Employer Patricia Lynch Associates Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 07 / 27 / 2010  
**Transaction ID:** C3128538  
 Amount of Each Receipt this Period 2400.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 190  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) Earle Mack		Date of Receipt MM / DD / YYYY 08 / 27 / 2010
Mailing Address 860 United Nations Plaza		<b>Transaction ID:</b> C3129036
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00
Name of Employer Information Requested	Occupation Information Requested	<b>[MEMO ITEM]</b> * Grassroots Victory Fund 2010
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5200.00	

**B.**

Full Name (Last, First, Middle Initial) Robinson Markel		Date of Receipt MM / DD / YYYY 08 / 16 / 2010
Mailing Address 575 Madison Ave		<b>Transaction ID:</b> C3129018
City New York	State NY	Zip Code 10022-2511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Katten Muchin Rosenman LLP	Occupation Attorney	<b>[MEMO ITEM]</b> * Grassroots Victory Fund 2010
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**C.**

Full Name (Last, First, Middle Initial) Kirk August Radke		Date of Receipt MM / DD / YYYY 08 / 24 / 2010
Mailing Address 153 East 53rd Street		<b>Transaction ID:</b> C3129028
City New York	State NY	Zip Code 10022-4611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Kirkland & Ellis LLP	Occupation Attorney	<b>[MEMO ITEM]</b> * Grassroots Victory Fund 2010
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 190  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Pierre Sarkozy

Mailing Address 520 Madison Avenue

City State Zip Code  
New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Carlyle Group Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2010

Transaction ID: C3129006

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth Strickler

Mailing Address 300 Central Park West  
25D

City State Zip Code  
New York NY 10024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Not Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2010

Transaction ID: C3128953

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**C.**

Full Name (Last, First, Middle Initial)  
Mary Ann Ann Tighe

Mailing Address 1320 York Ave

City State Zip Code  
New York NY 10021-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CB Richard Ellis, Inc. Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: C3129041

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Cynthia Wainwright Berger

Mailing Address 1050 Park Avenue

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Not Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2010

Transaction ID: C3129023

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Charles Wall

Mailing Address 170 East End Apt 10F

City State Zip Code  
New York NY 10128

FEC ID number of contributing federal political committee. **C**

Name of Employer Phillip Morris International Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
MM / DD / YYYY  
08 / 12 / 2010

Transaction ID: C3129001

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
\* Grassroots Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**TOTAL** This Period (last page this line number only) ..... ► **556273.88**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 190  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Arcuri for Congress  
Mailing Address P.O. Box 8508  
City State Zip Code  
Utica NY 13505  
FEC ID number of contributing federal political committee. **C** C00418541  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00  
Date of Receipt: 09 / 27 / 2010  
Transaction ID: C3124750  
Amount of Each Receipt this Period: 3000.00  
Payroll Expenses & Gas Cards

**B.** Full Name (Last, First, Middle Initial)  
Democratic National Committee  
Mailing Address 430 South Capitol Street, SE  
City State Zip Code  
Washington DC 20003  
FEC ID number of contributing federal political committee. **C** C00010603  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 156281.91  
Date of Receipt: 09 / 28 / 2010  
Transaction ID: C3134495  
Amount of Each Receipt this Period: 3550.00  
Office Rent

**C.** Full Name (Last, First, Middle Initial)  
Democratic National Committee  
Mailing Address 430 South Capitol Street, SE  
City State Zip Code  
Washington DC 20003  
FEC ID number of contributing federal political committee. **C** C00010603  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 156281.91  
Date of Receipt: 09 / 28 / 2010  
Transaction ID: C3134496  
Amount of Each Receipt this Period: 3550.00  
Office Rent

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10100.00  
**TOTAL** This Period (last page this line number only) ..... ►

**B.** Form/Schedule : **SA15**  
Transaction ID : **C3134495**

This is not a contribution. This is an offset to the rent that we paid to Rose Hill Property Association Inc. and the expenditure is reported on Schedule H4, Line 21(a).

**C.** Form/Schedule : **SA15**  
Transaction ID : **C3134496**

This is not a contribution. This is an offset to the rent that we paid to Rose Hill Property Association Inc. and the expenditure is reported on Schedule H4, Line 21(a).

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 156281.91

Date of Receipt

M M / D D / Y Y Y Y  
09 / 28 / 2010

Transaction ID: C3134497

Amount of Each Receipt this Period

3550.00

Office Rent

**B.**

Full Name (Last, First, Middle Initial)  
McMahon for Congress

Mailing Address 66 Arnold Street

City State Zip Code  
Staten Island NY 10301

FEC ID number of contributing federal political committee. **C** C00451138

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 52291.92

Date of Receipt

M M / D D / Y Y Y Y  
09 / 13 / 2010

Transaction ID: C3092310

Amount of Each Receipt this Period

6593.59

Payroll Expenses

**C.**

Full Name (Last, First, Middle Initial)  
McMahon for Congress

Mailing Address 66 Arnold Street

City State Zip Code  
Staten Island NY 10301

FEC ID number of contributing federal political committee. **C** C00451138

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 52291.92

Date of Receipt

M M / D D / Y Y Y Y  
09 / 27 / 2010

Transaction ID: C3124713

Amount of Each Receipt this Period

6482.19

Payroll Expenses

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

16625.78

**TOTAL** This Period (last page this line number only) ..... ▶

26725.78

A. Form/Schedule : **SA15**  
Transaction ID : **C3134497**

This is not a contribution. This is an offset to the rent that we paid to Rose Hill Property Association Inc. and the expenditure is reported on Schedule H4, Line 21(a).

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 190

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF MAURICE HINCHEY

Mailing Address PO Box 4497

City State Zip Code  
Kingston NY 12402

FEC ID number of contributing federal political committee. **C** C00272633

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 24 / 2010

Transaction ID: C3134575

Amount of Each Receipt this Period

5000.00

Voter File Access

**B.**

Full Name (Last, First, Middle Initial)

Paul Tonko for Congress

Mailing Address 911 Central Avenue  
PO Box 221

City State Zip Code  
Albany NY 12206

FEC ID number of contributing federal political committee. **C** C00450049

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 14 / 2010

Transaction ID: C3134510

Amount of Each Receipt this Period

10000.00

Voter File Access

**SUBTOTAL** of Receipts This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

15000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) 305 Lexington Avenue LLC  Mailing Address 27 Radio Circle, Suite 200  City Mount Kisco State NY Zip Code 10549  Purpose of Disbursement Office Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239639 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 1 0  Amount of Each Disbursement this Period 2400.00
<b>B.</b>	Full Name (Last, First, Middle Initial) ActBlue Technical Services  Mailing Address P.O. Box 382110  City Cambridge State MA Zip Code 02238-2110  Purpose of Disbursement Credit Card Processing Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D242768 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 1 0  Amount of Each Disbursement this Period 158.99
<b>C.</b>	Full Name (Last, First, Middle Initial) ActBlue Technical Services  Mailing Address P.O. Box 382110  City Cambridge State MA Zip Code 02238-2110  Purpose of Disbursement Credit Card Processing Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D242797 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 1 0  Amount of Each Disbursement this Period 21.73

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2580.72

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D242799 Date of Disbursement
	Mailing Address P.O. Box 382110	<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City Cambridge State MA Zip Code 02238-2110	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="0.99"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D242800 Date of Disbursement
	Mailing Address P.O. Box 382110	<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Cambridge State MA Zip Code 02238-2110	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="0.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Cablevision	Transaction ID: D242738 Date of Disbursement
	Mailing Address PO Box 371378	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Pittsburgh State PA Zip Code 15250-7378	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone & Internet	<input type="text" value="336.14"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="337.93"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Cablevision	Transaction ID: D241573 Date of Disbursement 09 / 23 / 2010
	Mailing Address PO Box 371897	Amount of Each Disbursement this Period 301.83
	City Pittsburgh State PA Zip Code 15250-7897	
	Purpose of Disbursement Telephone & Internet	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capricorn Lighting LLC	Transaction ID: D243648 Date of Disbursement 09 / 09 / 2010
	Mailing Address 3 Howland Street	Amount of Each Disbursement this Period 800.00
	City Chester State NY Zip Code 10918	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Consolidated Edison Company of N.Y. Inc.	Transaction ID: D241572 Date of Disbursement 09 / 23 / 2010
	Mailing Address JAF Station P.O. Box 1702	Amount of Each Disbursement this Period 317.19
	City New York State NY Zip Code 10116-1702	
	Purpose of Disbursement Utilities	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1419.02
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Democratic National Committee  Mailing Address 430 South Capitol Street, SE  City Washington State DC Zip Code 20003 Purpose of Disbursement Voter File Access Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242845 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010	Amount of Each Disbursement this Period 3220.00  * In-Kind Received
<b>B.</b>	Full Name (Last, First, Middle Initial) National Grid  Mailing Address P.O. Box 1303  City Buffalo State NY Zip Code 14240 Purpose of Disbursement Utilities Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241585 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010	Amount of Each Disbursement this Period 141.21
<b>C.</b>	Full Name (Last, First, Middle Initial) PAYCHEX  Mailing Address 1551 S. Washington Ave., P.O. Box 1180  City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Payroll Service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242584 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010	Amount of Each Disbursement this Period 168.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3529.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242576 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 56.28
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242577 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 69.04
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242579 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 43.65
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	168.97
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242580 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 48.81
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242581 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 54.24
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242582 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 14.98
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>118.03</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D241563 Date of Disbursement
	Mailing Address 550 Manor Rd	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Staten Island State NY Zip Code 10314	Amount of Each Disbursement this Period
	Purpose of Disbursement Post Office Box Fee	<input type="text" value="72.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: D241558 Date of Disbursement
	Mailing Address 170 East Main Street	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Patchogue State NY Zip Code 11772	Amount of Each Disbursement this Period
	Purpose of Disbursement PO Box Renewal Fee	<input type="text" value="72.00"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Rotondi	Transaction ID: D241561 Date of Disbursement
	Mailing Address 19 Timbercrest Lane	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City South Setauket State NY Zip Code 11720	Amount of Each Disbursement this Period
	Purpose of Disbursement Expense Reimbursements-see below	<input type="text" value="495.80"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="639.80"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Continental Electronic Ticketing Mailing Address 600 Jefferson Street City Houston State TX Zip Code 77002 Purpose of Disbursement GOTV Training Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D241562 Date of Disbursement 09 / 29 / 2010
	Amount of Each Disbursement this Period 495.80 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Bradley Komar Mailing Address 1900 Tilden Avenue City New Hartford State NY Zip Code 13413 Purpose of Disbursement Expense Reimbursements-see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D241578 Date of Disbursement 09 / 29 / 2010
	Amount of Each Disbursement this Period 1185.16 [MEMO ITEM]

<b>C.</b> Full Name (Last, First, Middle Initial) ASI Nextel Mailing Address 1314 Oneida Street City Utica State NY Zip Code 13502 Purpose of Disbursement Cell Phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D241583 Date of Disbursement 09 / 29 / 2010
	Amount of Each Disbursement this Period 108.73 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1185.16
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address 4725 Commercial Drive</p> <p>City New Hartford State NY Zip Code 13413</p> <p>Purpose of Disbursement Cell Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241584 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 260.96</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Radioshack</p> <p>Mailing Address 36 New Hartford Shop Center</p> <p>City New Hartford State NY Zip Code 13413-2144</p> <p>Purpose of Disbursement Cell Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241580 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 130.47</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) RadioShack</p> <p>Mailing Address 1 Sangertown Square</p> <p>City New Hartford State NY Zip Code 13413-1501</p> <p>Purpose of Disbursement Cell Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241581 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 97.85</p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) RadioShack  Mailing Address 5819 Rome-Taberg Rd  City Rome State NY Zip Code 13440-0000  Purpose of Disbursement Cell Phones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241582 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 65.23  <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Target  Mailing Address 1 Sangertown Square, Suite 3  City New Hartford State NY Zip Code 13413  Purpose of Disbursement Cell Phones Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241579 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 521.92  <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) American Express  Mailing Address P.O. Box 1270  City Newark State NJ Zip Code 07101-1270  Purpose of Disbursement Credit Card Payment-see below Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242190 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 3322.26

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3322.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Amazon.com</p> <p>Mailing Address 1516 2nd Avenue, FL 4</p> <p>City Seattle State WA Zip Code 98101-1543</p> <p>Purpose of Disbursement Phones &amp; Printers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242199 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 339.06</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address Atlanta Airport</p> <p>City Atlanta State GA Zip Code 30344</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242192 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 314.90</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Jetblue Airways</p> <p>Mailing Address P.O. Box 17435</p> <p>City Salt Lake City State UT Zip Code 84117-7435</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242191 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 958.20</p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: D242193 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1200 E Algonquin Rd	Amount of Each Disbursement this Period 349.40
	City Elk Grove Village State IL Zip Code 60007	
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: D242194 Date of Disbursement 09 / 29 / 2010
	Mailing Address 4000 E Sky Harbor Blvd.	Amount of Each Disbursement this Period 669.30
	City Phoenix State AZ Zip Code 85034	
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Vesta Boost Mobile	Transaction ID: D242197 Date of Disbursement 09 / 29 / 2010
	Mailing Address 11950 SW Garden Pl	Amount of Each Disbursement this Period 691.40
	City Portland State OR Zip Code 97223	
	Purpose of Disbursement Cell Phone Service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	13301.10

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 190

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jonathan Adonailo Mailing Address 34 Woods End Road City Hartsdale State NY Zip Code 10530 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239598 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 15 / 2010	Amount of Each Disbursement this Period 803.73
<b>B.</b>	Full Name (Last, First, Middle Initial) Jonathan Adonailo Mailing Address 34 Woods End Road City Hartsdale State NY Zip Code 10530 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239599 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 29 / 2010	Amount of Each Disbursement this Period 803.73
<b>C.</b>	Full Name (Last, First, Middle Initial) Aetna Mailing Address P.O. Box 7247-0233 City Philadelphia State PA Zip Code 19170-0233 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239597 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 02 / 2010	Amount of Each Disbursement this Period 84.40

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1691.86</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Aetna	Transaction ID: D241520 Date of Disbursement 09 / 02 / 2010
	Mailing Address P.O. Box 7247-0233	Amount of Each Disbursement this Period 42.20
	City Philadelphia State PA Zip Code 19170-0233	
	Purpose of Disbursement Health Insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alexandra Aiello	Transaction ID: D239653 Date of Disbursement 09 / 15 / 2010
	Mailing Address P.O. Box 81	Amount of Each Disbursement this Period 780.41
	City Callicoon Center State NY Zip Code 12724	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Alexandra Aiello	Transaction ID: D239654 Date of Disbursement 09 / 29 / 2010
	Mailing Address P.O. Box 81	Amount of Each Disbursement this Period 780.41
	City Callicoon Center State NY Zip Code 12724	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1603.02
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Blake Anderson	Transaction ID: D242198 Date of Disbursement 09 / 29 / 2010
	Mailing Address 11 Sunset Bay Drive	Amount of Each Disbursement this Period 1180.64
	City Belleair State FL Zip Code 33756	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Blake Anderson	Transaction ID: D242196 Date of Disbursement 09 / 15 / 2010
	Mailing Address 11 Sunset Bay Drive	Amount of Each Disbursement this Period 1256.19
	City Belleair State FL Zip Code 33756	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steve Balik	Transaction ID: D239571 Date of Disbursement 09 / 01 / 2010
	Mailing Address 7 Henry Avenue	Amount of Each Disbursement this Period 803.73
	City Centereach State NY Zip Code 11720	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **3240.56**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Steve Balik</p> <p>Mailing Address 7 Henry Avenue</p> <p>City Centereach State NY Zip Code 11720</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239585</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Steve Balik</p> <p>Mailing Address 7 Henry Avenue</p> <p>City Centereach State NY Zip Code 11720</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239586</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Eamonn F. Berry</p> <p>Mailing Address 23 N. Brette Street</p> <p>City Beacon State NY Zip Code 12508</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241575</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="2411.19"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Eamonn F. Berry</p> <p>Mailing Address 23 N. Brette Street</p> <p>City Beacon State NY Zip Code 12508</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241568</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="854.76"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bill Lynch Associates, LLC</p> <p>Mailing Address 308 Lenox Avenue</p> <p>City New York State NY Zip Code 10027</p> <p>Purpose of Disbursement Communications Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241557</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matthew J. Burdine</p> <p>Mailing Address 3745 SW Austin Street</p> <p>City Seattle State WA Zip Code 98126</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241576</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="575.91"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Matthew J. Burdine <hr/> Mailing Address 3745 SW Austin Street <hr/> City Seattle State WA Zip Code 98126 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242100 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 780.41
B.	Full Name (Last, First, Middle Initial) Michael Cass-Antony <hr/> Mailing Address 297 6th Avenue, #3 <hr/> City Brooklyn State NY Zip Code 11215 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242545 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 831.11
C.	Full Name (Last, First, Middle Initial) Michael Cass-Antony <hr/> Mailing Address 297 6th Avenue, #3 <hr/> City Brooklyn State NY Zip Code 11215 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242546 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 780.41

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2391.93

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Rebecca Cornell <hr/> Mailing Address 1714 D Street SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239655 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 803.73
<b>B.</b>	Full Name (Last, First, Middle Initial) Rebecca Cornell <hr/> Mailing Address 1714 D Street SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239656 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 803.73
<b>C.</b>	Full Name (Last, First, Middle Initial) Adrian Culea <hr/> Mailing Address 266 Route 9 <hr/> City Fishkill State NY Zip Code 12524 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239627 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 780.41

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2387.87</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Adrian Culea	Transaction ID: D239628
	Mailing Address 266 Route 9	Date of Disbursement 09 / 15 / 2010
	City Fishkill State NY Zip Code 12524	Amount of Each Disbursement this Period 780.41
	Purpose of Disbursement Wages	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Adrian Culea	Transaction ID: D239629
	Mailing Address 266 Route 9	Date of Disbursement 09 / 29 / 2010
	City Fishkill State NY Zip Code 12524	Amount of Each Disbursement this Period 780.41
	Purpose of Disbursement Wages	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Michael J. Cunningham	Transaction ID: D239630
	Mailing Address 2007 Luzerne Avenue	Date of Disbursement 09 / 01 / 2010
	City Silver Spring State MD Zip Code 20910	Amount of Each Disbursement this Period 803.73
	Purpose of Disbursement Wages	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2364.55</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Michael J. Cunningham	Transaction ID: D239631 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2007 Luzerne Avenue	Amount of Each Disbursement this Period 803.73
	City Silver Spring State MD Zip Code 20910	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael J. Cunningham	Transaction ID: D239632 Date of Disbursement 09 / 29 / 2010
	Mailing Address 2007 Luzerne Avenue	Amount of Each Disbursement this Period 803.73
	City Silver Spring State MD Zip Code 20910	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) James M. Curcio	Transaction ID: D239649 Date of Disbursement 09 / 01 / 2010
	Mailing Address 14 S. Lilburn Drive	Amount of Each Disbursement this Period 803.73
	City Garnerville State NY Zip Code 10923	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2411.19
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) James M. Curcio	Transaction ID: D239650 Date of Disbursement 09 / 15 / 2010
	Mailing Address 14 S. Lilburn Drive	Amount of Each Disbursement this Period 803.73
	City Garnerville State NY Zip Code 10923	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) James M. Curcio	Transaction ID: D239652 Date of Disbursement 09 / 29 / 2010
	Mailing Address 14 S. Lilburn Drive	Amount of Each Disbursement this Period 803.73
	City Garnerville State NY Zip Code 10923	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Patrick Dennis	Transaction ID: D239600 Date of Disbursement 09 / 15 / 2010
	Mailing Address 5 Parsons Road	Amount of Each Disbursement this Period 803.73
	City Kendall Park State NJ Zip Code 08824	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2411.19
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Patrick Dennis	Transaction ID: D239601 Date of Disbursement 09 / 29 / 2010
	Mailing Address 5 Parsons Road	Amount of Each Disbursement this Period 803.73
	City Kendall Park State NJ Zip Code 08824	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Caitlin Donovan	Transaction ID: D239657 Date of Disbursement 09 / 15 / 2010
	Mailing Address 336 Southwest 8th Street	Amount of Each Disbursement this Period 780.41
	City Oswego State NY Zip Code 13126	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Caitlin Donovan	Transaction ID: D239658 Date of Disbursement 09 / 29 / 2010
	Mailing Address 336 Southwest 8th Street	Amount of Each Disbursement this Period 780.41
	City Oswego State NY Zip Code 13126	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2364.55
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Alexander Edelman	Transaction ID: D239659 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1134 Maroney Lane	Amount of Each Disbursement this Period 1310.90
	City Pacific Palisades State CA Zip Code 90272	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alexander Edelman	Transaction ID: D239660 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1134 Maroney Lane	Amount of Each Disbursement this Period 1310.90
	City Pacific Palisades State CA Zip Code 90272	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kevin Elkins	Transaction ID: D239610 Date of Disbursement 09 / 01 / 2010
	Mailing Address 451 Yetman Avenue	Amount of Each Disbursement this Period 515.54
	City Staten Island State NY Zip Code 10307	
	Purpose of Disbursement Wages	
	Candidate Name Michael McMahon	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3137.34

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
Kevin Elkins

Mailing Address 451 Yetman Avenue

City Staten Island State NY Zip Code 10307

Purpose of Disbursement  
Wages

Candidate Name  
Michael McMahan

Office Sought:  House  
 Senate  
 President

State: NY District: 13

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: D239611  
Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

515.54

B.

Full Name (Last, First, Middle Initial)  
Kevin Elkins

Mailing Address 451 Yetman Avenue

City Staten Island State NY Zip Code 10307

Purpose of Disbursement  
Wages

Candidate Name  
Michael McMahan

Office Sought:  House  
 Senate  
 President

State: NY District: 13

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: D239612  
Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

515.54

C.

Full Name (Last, First, Middle Initial)  
Jared Fishedick

Mailing Address 1374 Broadway Avenue

City Holbrook State NY Zip Code 11741

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: D239587  
Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

921.77

SUBTOTAL of Disbursements This Page (optional) ..... ►

1952.85

TOTAL This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Jared Fishedick</p> <p>Mailing Address 1374 Broadway Avenue</p> <p>City Holbrook State NY Zip Code 11741</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239588</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="921.77"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Jared Fishedick</p> <p>Mailing Address 1374 Broadway Avenue</p> <p>City Holbrook State NY Zip Code 11741</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239589</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="921.77"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Joseph Gaylord</p> <p>Mailing Address 11 Wilderness Lane</p> <p>City Valatie State NY Zip Code 12184</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242573</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1337.99"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3181.53"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Global Strategy Group, LLC	Transaction ID: D241556 Date of Disbursement
	Mailing Address 895 Broadway	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City New York State NY Zip Code 10003-1226	Amount of Each Disbursement this Period
	Purpose of Disbursement Research Consultant	<input type="text" value="70000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Finley Harckham	Transaction ID: D239633 Date of Disbursement
	Mailing Address 28 Irvine Rd.	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Old Greenwich State CT Zip Code 06870	Amount of Each Disbursement this Period
	Purpose of Disbursement Wages	<input type="text" value="780.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Finley Harckham	Transaction ID: D239634 Date of Disbursement
	Mailing Address 28 Irvine Rd.	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Old Greenwich State CT Zip Code 06870	Amount of Each Disbursement this Period
	Purpose of Disbursement Wages	<input type="text" value="780.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="71560.82"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Finley Harckham	Transaction ID: D239635 Date of Disbursement 09 / 29 / 2010
	Mailing Address 28 Irvine Rd.	Amount of Each Disbursement this Period 780.41
	City Old Greenwich State CT Zip Code 06870	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) John B. Hill	Transaction ID: D239613 Date of Disbursement 09 / 01 / 2010
	Mailing Address 2 Alfred Road W.	Amount of Each Disbursement this Period 974.64
	City Merrick State NY Zip Code 11566	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John B. Hill	Transaction ID: D239614 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2 Alfred Road W.	Amount of Each Disbursement this Period 974.64
	City Merrick State NY Zip Code 11566	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2729.69
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) John B. Hill	Transaction ID: D239615 Date of Disbursement 09 / 29 / 2010
	Mailing Address 2 Alfred Road W.	Amount of Each Disbursement this Period 974.64
	City Merrick State NY Zip Code 11566	
	Purpose of Disbursement Wages	
	Candidate Name Michael McMahon	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NY District: 13	

B.	Full Name (Last, First, Middle Initial) Richard J. Horner, Jr.	Transaction ID: D239496 Date of Disbursement 09 / 01 / 2010
	Mailing Address 767 Mineral Springs Rd.	Amount of Each Disbursement this Period 2156.49
	City West Seneca State NY Zip Code 14224	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Richard J. Horner, Jr.	Transaction ID: D239498 Date of Disbursement 09 / 15 / 2010
	Mailing Address 767 Mineral Springs Rd.	Amount of Each Disbursement this Period 2156.49
	City West Seneca State NY Zip Code 14224	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5287.62
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
Richard J. Horner, Jr.

Transaction ID: D239500  
Date of Disbursement

Mailing Address 767 Mineral Springs Rd.

/  /

City State Zip Code  
West Seneca NY 14224

Amount of Each Disbursement this Period

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Melissa Jones

Transaction ID: D242547  
Date of Disbursement

Mailing Address 364 Platt Hill Rd

/  /

City State Zip Code  
Winsted CT 06098

Amount of Each Disbursement this Period

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Melissa Jones

Transaction ID: D242548  
Date of Disbursement

Mailing Address 364 Platt Hill Rd

/  /

City State Zip Code  
Winsted CT 06098

Amount of Each Disbursement this Period

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Arona Kessler	Transaction ID: D239590 Date of Disbursement 09 / 01 / 2010
	Mailing Address 5 Lenore Court	
	City Port Jefferson Sta State NY Zip Code 11776	Amount of Each Disbursement this Period 780.41
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Arona Kessler	Transaction ID: D239591 Date of Disbursement 09 / 15 / 2010
	Mailing Address 5 Lenore Court	
	City Port Jefferson Sta State NY Zip Code 11776	Amount of Each Disbursement this Period 780.41
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Arona Kessler	Transaction ID: D239592 Date of Disbursement 09 / 29 / 2010
	Mailing Address 5 Lenore Court	
	City Port Jefferson Sta State NY Zip Code 11776	Amount of Each Disbursement this Period 780.41
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2341.23
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Charles G. King	Transaction ID: D239502 Date of Disbursement 09 / 01 / 2010
	Mailing Address 10 York Drive	Amount of Each Disbursement this Period 3651.77
	City New City State NY Zip Code 10956	
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Charles G. King	Transaction ID: D239504 Date of Disbursement 09 / 15 / 2010
	Mailing Address 10 York Drive	Amount of Each Disbursement this Period 3651.77
	City New City State NY Zip Code 10956	
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Charles G. King	Transaction ID: D239505 Date of Disbursement 09 / 29 / 2010
	Mailing Address 10 York Drive	Amount of Each Disbursement this Period 3651.77
	City New City State NY Zip Code 10956	
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10955.31
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Bradley Komar	Transaction ID: D239642 Date of Disbursement 09 / 15 / 2010
	Mailing Address 2349 Tall Sall Drive, Apt. C	Amount of Each Disbursement this Period 1424.42
	City Charleston State SC Zip Code 29414	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bradley Komar	Transaction ID: D239643 Date of Disbursement 09 / 29 / 2010
	Mailing Address 2349 Tall Sall Drive, Apt. C	Amount of Each Disbursement this Period 1424.42
	City Charleston State SC Zip Code 29414	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rakhee Kulkarni	Transaction ID: D239602 Date of Disbursement 09 / 15 / 2010
	Mailing Address 7 Blossom Street	Amount of Each Disbursement this Period 803.73
	City Dix Hills State NY Zip Code 11746	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3652.57
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Rakhee Kulkarni <hr/> Mailing Address 7 Blossom Street <hr/> City Dix Hills State NY Zip Code 11746 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239603 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 803.73
<b>B.</b>	Full Name (Last, First, Middle Initial) Nikhil Kumar <hr/> Mailing Address 23 Robinwood Drive <hr/> City Clifton Park State NY Zip Code 12065 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242572 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 419.60
<b>C.</b>	Full Name (Last, First, Middle Initial) Ruben Leavitt <hr/> Mailing Address 17 Lido Blvd. <hr/> City Long Beach State NY Zip Code 11561 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239644 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 780.41

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2003.74

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ruben Leavitt <hr/> Mailing Address 17 Lido Blvd. <hr/> City Long Beach State NY Zip Code 11561 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239645 Date of Disbursement 09 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 780.41
<b>B.</b>	Full Name (Last, First, Middle Initial) Mack Crouse Group, LLC <hr/> Mailing Address 2001 N. Beauregard Street, Suite 4 <hr/> City Alexandria State VA Zip Code 22311 <hr/> Purpose of Disbursement Exempt Mail-Hall Candidate Name John Hall <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241574 Date of Disbursement 09 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 32372.60
<b>C.</b>	Full Name (Last, First, Middle Initial) Mack Crouse Group, LLC <hr/> Mailing Address 2001 N. Beauregard Street, Suite 4 <hr/> City Alexandria State VA Zip Code 22311 <hr/> Purpose of Disbursement Exempt Mail-Hall Candidate Name John Hall <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241570 Date of Disbursement 09 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 37167.97

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

70320.98

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Mack Crouse Group, LLC	Transaction ID: D241571 Date of Disbursement 09 / 24 / 2010
	Mailing Address 2001 N. Beauregard Street, Suite 4	Amount of Each Disbursement this Period 32645.87
	City Alexandria State VA Zip Code 22311	
	Purpose of Disbursement Exempt Mail-Hall	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Scott Matthews	Transaction ID: D242186 Date of Disbursement 09 / 15 / 2010
	Mailing Address 404 Route 189	Amount of Each Disbursement this Period 780.41
	City Churubusco State NY Zip Code 12923	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Scott Matthews	Transaction ID: D242188 Date of Disbursement 09 / 29 / 2010
	Mailing Address 404 Route 189	Amount of Each Disbursement this Period 780.41
	City Churubusco State NY Zip Code 12923	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>34206.69</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Scott Matthews	Transaction ID: D242578
	Mailing Address 404 Route 189	Date of Disbursement 09 / 01 / 2010
	City Churubusco State NY Zip Code 12923	Amount of Each Disbursement this Period 831.11
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Elizabeth S. McKenna	Transaction ID: D242551
	Mailing Address 24 Ausaroar Way	Date of Disbursement 09 / 15 / 2010
	City Lake Placid State NY Zip Code 12946	Amount of Each Disbursement this Period 831.11
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Elizabeth S. McKenna	Transaction ID: D242553
	Mailing Address 24 Ausaroar Way	Date of Disbursement 09 / 29 / 2010
	City Lake Placid State NY Zip Code 12946	Amount of Each Disbursement this Period 780.41
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2442.63</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Danielle McMullen	Transaction ID: D242558 Date of Disbursement 09 / 15 / 2010
	Mailing Address 6 Elman Street	
	City Broadalbin State NY Zip Code 12025	Amount of Each Disbursement this Period 854.76
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Danielle McMullen	Transaction ID: D242561 Date of Disbursement 09 / 29 / 2010
	Mailing Address 6 Elman Street	
	City Broadalbin State NY Zip Code 12025	Amount of Each Disbursement this Period 803.73
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) James McNamara	Transaction ID: D239593 Date of Disbursement 09 / 01 / 2010
	Mailing Address 4 Fox Hollow Road	
	City Setauket State NY Zip Code 11733	Amount of Each Disbursement this Period 803.73
	Purpose of Disbursement Wages Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2462.22
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) James McNamara	Transaction ID: D239594 Date of Disbursement 09 / 15 / 2010
	Mailing Address 4 Fox Hollow Road	Amount of Each Disbursement this Period 131.22
	City Setauket State NY Zip Code 11733	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Megan Miraglia	Transaction ID: D242562 Date of Disbursement 09 / 15 / 2010
	Mailing Address 4852 Prospect Avenue	Amount of Each Disbursement this Period 831.11
	City Cincinnati State OH Zip Code 45242	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Megan Miraglia	Transaction ID: D242563 Date of Disbursement 09 / 29 / 2010
	Mailing Address 4852 Prospect Avenue	Amount of Each Disbursement this Period 780.41
	City Cincinnati State OH Zip Code 45242	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1742.74
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc. <hr/> Mailing Address 114 A Mansfield Hollow Rd. <hr/> City Mansfield Center State CT Zip Code 06250 <hr/> Purpose of Disbursement Exempt Mail-Murphy Candidate Name Scott Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241587 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 18252.80
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc. <hr/> Mailing Address 114 A Mansfield Hollow Rd. <hr/> City Mansfield Center State CT Zip Code 06250 <hr/> Purpose of Disbursement Exempt Mail-Murphy Candidate Name Scott Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241588 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 66481.72
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc. <hr/> Mailing Address 114 A Mansfield Hollow Rd. <hr/> City Mansfield Center State CT Zip Code 06250 <hr/> Purpose of Disbursement Exempt Mail-Maffei Candidate Name Dan Maffei <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241589 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 29129.96
	Category/ Type
	Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**113864.48**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc.</p> <p>Mailing Address 114 A Mansfield Hollow Rd.</p> <p>City Mansfield Center State CT Zip Code 06250</p> <p>Purpose of Disbursement Exempt Mail-Maffei</p> <p>Candidate Name Dan Maffei</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 25</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241590 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 29738.96</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc.</p> <p>Mailing Address 114 A Mansfield Hollow Rd.</p> <p>City Mansfield Center State CT Zip Code 06250</p> <p>Purpose of Disbursement Exempt Mail-Bishop</p> <p>Candidate Name Timothy Bishop</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 01</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241559 <b>Date of Disbursement</b> 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 136398.12</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc.</p> <p>Mailing Address 114 A Mansfield Hollow Rd.</p> <p>City Mansfield Center State CT Zip Code 06250</p> <p>Purpose of Disbursement Exempt Mail-Bishop</p> <p>Candidate Name Timothy Bishop</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 01</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241560 <b>Date of Disbursement</b> 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 134654.12</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

300791.20

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Angelo Monforte <hr/> Mailing Address 211 Woodycrest Drive <hr/> City Holtsville State NY Zip Code 11742 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239595 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2010
	Amount of Each Disbursement this Period 780.41
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Angelo Monforte <hr/> Mailing Address 211 Woodycrest Drive <hr/> City Holtsville State NY Zip Code 11742 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D239596 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 131.22
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Oxford Health Plans <hr/> Mailing Address P.O. Box 1697 <hr/> City Newark State NJ Zip Code 07101-1697 <hr/> Purpose of Disbursement Health Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D241524 Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2010
	Amount of Each Disbursement this Period 2141.92
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3053.55
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Oxford Health Plans	Transaction ID: D241526 Date of Disbursement
	Mailing Address P.O. Box 1697	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Newark State NJ Zip Code 07101-1697	Amount of Each Disbursement this Period
	Purpose of Disbursement Health Insurance	<input type="text" value="2141.92"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rohan Parikh	Transaction ID: D242575 Date of Disbursement
	Mailing Address 21 Fruitbud Drive	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Red Hook State NY Zip Code 12571-2117	Amount of Each Disbursement this Period
	Purpose of Disbursement Wages	<input type="text" value="1078.71"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242570 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="6069.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9290.33"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 1551 S. Washington Ave., P.O. Box 1180</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement Payroll Taxes/Withholdings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242571 <b>Date of Disbursement:</b> 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1759.59</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 1551 S. Washington Ave., P.O. Box 1180</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement Payroll Taxes/Withholdings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242586 <b>Date of Disbursement:</b> 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 6069.70</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) PAYCHEX</p> <p>Mailing Address 1551 S. Washington Ave., P.O. Box 1180</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement Payroll Taxes/Withholdings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242587 <b>Date of Disbursement:</b> 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 3366.96</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

11196.25

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242588 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2499.95
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242589 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1729.39
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242590 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1869.70
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6099.04
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242591 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2391.83
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242592 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2645.64
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242596 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 6069.70
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	11107.17
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242597 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="3275.84"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242598 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="2471.46"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242599 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="1979.62"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7726.92"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242600 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2391.83
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242601 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 3685.22
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242559 Date of Disbursement 09 / 01 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 77.22
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6154.27
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242544 Date of Disbursement																			
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	1	0												
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll Taxes/Withholdings	<table border="1"> <tr> <td>4253.14</td> </tr> </table>	4253.14																		
4253.14																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242554 Date of Disbursement																			
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	1	0												
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll Taxes/Withholdings	<table border="1"> <tr> <td>1406.24</td> </tr> </table>	1406.24																		
1406.24																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242555 Date of Disbursement																			
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	1		2	0	1	0												
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll Taxes/Withholdings	<table border="1"> <tr> <td>1660.73</td> </tr> </table>	1660.73																		
1660.73																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"> <tr> <td>7320.11</td> </tr> </table>	7320.11
7320.11		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"> <tr> <td></td> </tr> </table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242556 Date of Disbursement 09 / 01 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1927.79
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D242550 Date of Disbursement 09 / 01 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 774.53
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D243647 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1697.24
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4399.56
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Jonathan Rabunski <hr/> Mailing Address 72 Pine Brook Drive <hr/> City Larchmont State NY Zip Code 10538 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242583 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2010
	Amount of Each Disbursement this Period 262.66
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Jonathan Rabunski <hr/> Mailing Address 72 Pine Brook Drive <hr/> City Larchmont State NY Zip Code 10538 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242189 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 827.06
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Rabunski <hr/> Mailing Address 72 Pine Brook Drive <hr/> City Larchmont State NY Zip Code 10538 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D242195 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010
	Amount of Each Disbursement this Period 827.06
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1916.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Jovia A. Radix	Transaction ID: D239616 Date of Disbursement 09 / 01 / 2010
	Mailing Address 4901 Avenue K	Amount of Each Disbursement this Period 891.66
	City Brooklyn State NY Zip Code 11234	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Jovia A. Radix	Transaction ID: D239617 Date of Disbursement 09 / 15 / 2010
	Mailing Address 4901 Avenue K	Amount of Each Disbursement this Period 891.66
	City Brooklyn State NY Zip Code 11234	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Jovia A. Radix	Transaction ID: D239618 Date of Disbursement 09 / 29 / 2010
	Mailing Address 4901 Avenue K	Amount of Each Disbursement this Period 891.66
	City Brooklyn State NY Zip Code 11234	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2674.98

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Terence J. Rogers	Transaction ID: D239636 Date of Disbursement 09 / 15 / 2010
	Mailing Address 140 Schrade Rd	Amount of Each Disbursement this Period 1355.96
	City Briarcliff Manor State NY Zip Code 10510	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Terence J. Rogers	Transaction ID: D239637 Date of Disbursement 09 / 29 / 2010
	Mailing Address 140 Schrade Rd	Amount of Each Disbursement this Period 1355.96
	City Briarcliff Manor State NY Zip Code 10510	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Rotondi	Transaction ID: D239604 Date of Disbursement 09 / 15 / 2010
	Mailing Address 19 Timbercrest Lane	Amount of Each Disbursement this Period 1802.37
	City South Setauket State NY Zip Code 11720	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4514.29</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Eric Rotondi</p> <p>Mailing Address 19 Timbercrest Lane</p> <p>City South Setauket State NY Zip Code 11720</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239605</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1802.37"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Edgar R. Santana</p> <p>Mailing Address 1438 Glover Street</p> <p>City Bronx State NY Zip Code 10462</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239518</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2775.40"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Edgar R. Santana</p> <p>Mailing Address 1438 Glover Street</p> <p>City Bronx State NY Zip Code 10462</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239519</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2775.40"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Edgar R. Santana</p> <p>Mailing Address 1438 Glover Street</p> <p>City Bronx State NY Zip Code 10462</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239521</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2775.40"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael Schubert</p> <p>Mailing Address 716 Timber Branch Drive</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239606</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="827.06"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael Schubert</p> <p>Mailing Address 716 Timber Branch Drive</p> <p>City Alexandria State VA Zip Code 22302</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239607</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="827.06"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Aja Shasanmi</p> <p>Mailing Address 88 Edgecombe Ave., #3</p> <p>City New York State NY Zip Code 10030</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239608</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="782.54"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Aja Shasanmi</p> <p>Mailing Address 88 Edgecombe Ave., #3</p> <p>City New York State NY Zip Code 10030</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239609</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="782.54"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matthew Signorile</p> <p>Mailing Address 977 Armstrong Avenue</p> <p>City Staten Island State NY Zip Code 10308</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name Michael McMahon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 13</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D239619</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2368.81"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Matthew Signorile	Transaction ID: D239620 Date of Disbursement 09 / 15 / 2010
	Mailing Address 977 Armstrong Avenue	Amount of Each Disbursement this Period 803.73
	City Staten Island State NY Zip Code 10308	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Matthew Signorile	Transaction ID: D239621 Date of Disbursement 09 / 29 / 2010
	Mailing Address 977 Armstrong Avenue	Amount of Each Disbursement this Period 803.73
	City Staten Island State NY Zip Code 10308	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Smith	Transaction ID: D239625 Date of Disbursement 09 / 15 / 2010
	Mailing Address 105 Sally Road	Amount of Each Disbursement this Period 1484.92
	City Zanesville State OH Zip Code 43701	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3092.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Eric Smith</p> <p>Mailing Address 105 Sally Road</p> <p>City Zanesville State OH Zip Code 43701</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name Michael McMahon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 13</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242090</p> <p>Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1484.92</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Derek J. Speziale</p> <p>Mailing Address 143 Tahlulah Lane</p> <p>City West Islip State NY Zip Code 11795</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242566</p> <p>Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 361.78</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Mirram Group</p> <p>Mailing Address 895 Broadway, 5th Floor</p> <p>City New York State NY Zip Code 10003</p> <p>Purpose of Disbursement Media Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241555</p> <p>Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 11666.67</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

13513.37

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Matthew Timmeny	Transaction ID: D242568 Date of Disbursement 09 / 15 / 2010
	Mailing Address 312 4th Street SE	Amount of Each Disbursement this Period 831.11
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Matthew Timmeny	Transaction ID: D242569 Date of Disbursement 09 / 29 / 2010
	Mailing Address 312 4th Street SE	Amount of Each Disbursement this Period 780.41
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Peter Urmston	Transaction ID: D239640 Date of Disbursement 09 / 01 / 2010
	Mailing Address 25 Pine Hill Road	Amount of Each Disbursement this Period 803.73
	City Annandale State NJ Zip Code 08801	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2415.25
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Peter Urmston <hr/> Mailing Address 25 Pine Hill Road <hr/> City Annandale State NJ Zip Code 08801 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239641 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 803.73
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Peter Urmston <hr/> Mailing Address 25 Pine Hill Road <hr/> City Annandale State NJ Zip Code 08801 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239646 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 29 / 2010
	Amount of Each Disbursement this Period 803.73
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Donald L. Vincent <hr/> Mailing Address 11759 S. 85th Avenue <hr/> City Palos Park State IL Zip Code 60464 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D239647 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 780.41
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2387.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 190

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Donald L. Vincent	Transaction ID: D239648 Date of Disbursement 09 / 29 / 2010
	Mailing Address 11759 S. 85th Avenue	Amount of Each Disbursement this Period 780.41
	City Palos Park State IL Zip Code 60464	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Jeff Yurcan	Transaction ID: D239622 Date of Disbursement 09 / 01 / 2010
	Mailing Address 315 East 95th Street, Apt. 5A	Amount of Each Disbursement this Period 958.26
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Wages	
	Candidate Name Michael McMahon	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NY District: 13	

C.	Full Name (Last, First, Middle Initial) Jeff Yurcan	Transaction ID: D239623 Date of Disbursement 09 / 15 / 2010
	Mailing Address 315 East 95th Street, Apt. 5A	Amount of Each Disbursement this Period 958.26
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Wages	
	Candidate Name Michael McMahon	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NY District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2696.93
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 190

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
Jeff Yurcan

Mailing Address 315 East 95th Street, Apt. 5A

City State Zip Code  
New York NY 10128

Purpose of Disbursement  
Wages

Candidate Name  
Michael McMahon

Office Sought:  House  
 Senate  
 President  
State: NY District: 13

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: D239624

Date of Disbursement

/   /

Amount of Each Disbursement this Period

958.26

SUBTOTAL of Disbursements This Page (optional) .....

958.26

TOTAL This Period (last page this line number only) .....

788279.04

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> CDX Strategic Communications			Nature of Debt (Purpose): Website
Mailing Address 1900 South Eads Street, #1210			
City Arlington	State VA	ZIP Code 22202	

Outstanding Balance Beginning This Period 1500.00		<b>Transaction ID: D228673</b>	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> IBF Consulting, Inc.			Nature of Debt (Purpose): Computer Consulting
Mailing Address 200 East 36th Street, Suite 6D			
City New York	State NY	ZIP Code 10016	

Outstanding Balance Beginning This Period 565.00		<b>Transaction ID: D228661</b>	
Amount Incurred This Period 0.00	Payment This Period 565.00	Outstanding Balance at Close of This Period 0.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> LexisNexis			Nature of Debt (Purpose): Research Subscriptions
Mailing Address P.O. Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-7090	

Outstanding Balance Beginning This Period 574.86		<b>Transaction ID: D228665</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 574.86	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	574.86
<b>2) TOTALS</b> This Period (last page this line number only).....	[ ]
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	[ ]
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	[ ]

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Sandler, Reiff & Young, PC			Nature of Debt (Purpose): Professional Services-Legal
Mailing Address 300 M Street, SE, Suite 1102			
City Washington	State DC	ZIP Code 20003	

Outstanding Balance Beginning This Period <input type="text" value="1600.00"/>		<b>Transaction ID: D228658</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1600.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Wells Fargo Financial Leasing			Nature of Debt (Purpose): Copier Rental
Mailing Address P.O. Box 6434			
City Carol Stream	State IL	ZIP Code 60197-6434	

Outstanding Balance Beginning This Period <input type="text" value="918.78"/>		<b>Transaction ID: D228662</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="918.78"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Zale Koff Graphics, Inc.			Nature of Debt (Purpose): Printing
Mailing Address 225 Varick Street, 4th Floor			
City New York	State NY	ZIP Code 10014	

Outstanding Balance Beginning This Period <input type="text" value="24613.55"/>		<b>Transaction ID: D1365</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="24613.55"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="25532.33"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text" value="26107.19"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="26107.19"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor City: New York    State: NY    ZIP Code: 10016

Full Name (Last, First, Middle Initial) of Each Payee Mission Control, Inc.	Purpose of Expenditure Walk Card
Mailing Address 114 A Mansfield Hollow Rd.	<input style="width: 50px; height: 20px;" type="text"/> Category/Type
City: Mansfield Center    State: CT    ZIP Code: 06250	Date: 09 / 29 / 2010
Name of Federal Candidate Supported: William Owens Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: NY    District: 23	Amount: 5375.00
Aggregate General Election Expenditure for this Candidate ▶ <input style="width: 150px;" type="text" value="5375.00"/>	Transaction ID: D241586

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶	<input style="width: 100%; height: 20px;" type="text" value="5375.00"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input style="width: 100%; height: 20px;" type="text" value="5375.00"/>

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	3		2	0	1	0	TOTAL AMOUNT TRANSFERRED 2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	3		2	0	1	0													

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	2000.00	Transaction ID: T1183
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYS Campaign	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 17 / 2010	TOTAL AMOUNT TRANSFERRED 32280.66
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	32280.66	Transaction ID: T1184
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 17 / 2010	TOTAL AMOUNT TRANSFERRED 11223.48
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	11223.48	Transaction ID: T1185
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYS Campaign	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 12914.38
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	12914.38	Transaction ID: T1186
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYS Campaign	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 37211.53
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	37211.53	Transaction ID: T1187
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYS Campaign	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 30 / 2010	TOTAL AMOUNT TRANSFERRED 6887.46
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BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		6887.46 Transaction ID: T1188
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
<b>TOTAL</b> This Period (Administrative) .....	102517.51
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	102517.51

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Aetna			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 7247-0233			Allocated Activity or Event Year-To-Date 833049.18	
City Philadelphia	State PA	Zip Code 19170-0233	Date <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Health Insurance			Transaction ID: D241519	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.59		100.01		126.60

<b>B. Full Name (Last, First, Middle Initial)</b> Alex Voetsch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 315 West 54th Street, Apt. 8			Allocated Activity or Event Year-To-Date 833049.18	
City New York	State NY	Zip Code 10019	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Wages			Transaction ID: D239568	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.25		956.47		1210.72

<b>C. Full Name (Last, First, Middle Initial)</b> Alex Voetsch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 315 West 54th Street, Apt. 8			Allocated Activity or Event Year-To-Date 833049.18	
City New York	State NY	Zip Code 10019	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Wages			Transaction ID: D239569	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.25		956.47		1210.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
535.09		2012.95		2548.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Alison Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Lexington Avenue, Apt. 4J			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 01 / 2010 <b>Transaction ID:</b> D239522		
New York	NY	10029			
Purpose of Disbursement: Wages			Category/ Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.65		920.35		1165.00

<b>B. Full Name (Last, First, Middle Initial)</b> Alison Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Lexington Avenue, Apt. 4J			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 15 / 2010 <b>Transaction ID:</b> D239523		
New York	NY	10029			
Purpose of Disbursement: Wages			Category/ Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.65		920.35		1165.00

<b>C. Full Name (Last, First, Middle Initial)</b> Alison Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Lexington Avenue, Apt. 4J			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010 <b>Transaction ID:</b> D239524		
New York	NY	10029			
Purpose of Disbursement: Wages			Category/ Type		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.65		920.35		1165.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
733.95		2761.05		3495.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 53852			Allocated Activity or Event Year-To-Date 833049.18		
City Phoenix	State AZ	Zip Code 85072-3852	Date M M / D D / Y Y Y Y 09 / 01 / 2010		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D239485		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.04		3.91		4.95

<b>B. Full Name (Last, First, Middle Initial)</b> Bartholomew J. Caro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 30 Hartford Lane			Allocated Activity or Event Year-To-Date 833049.18		
City White Plains	State NY	Zip Code 10603	Date M M / D D / Y Y Y Y 09 / 15 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D239493		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.19		828.31		1048.50

<b>C. Full Name (Last, First, Middle Initial)</b> Bartholomew J. Caro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 30 Hartford Lane			Allocated Activity or Event Year-To-Date 833049.18		
City White Plains	State NY	Zip Code 10603	Date M M / D D / Y Y Y Y 09 / 29 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D239494		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.19		828.31		1048.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
441.42		1660.53		2101.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Bartholomew J. Caro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 30 Hartford Lane			Allocated Activity or Event Year-To-Date 833049.18		
City White Plains	State NY	Zip Code 10603	Date MM / DD / YYYY 09 / 01 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D239488		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.19		828.31		1048.50

<b>B. Full Name (Last, First, Middle Initial)</b> Caroline Griffin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11 Harris Avenue			Allocated Activity or Event Year-To-Date 833049.18		
City Albany	State NY	Zip Code 12208	Date MM / DD / YYYY 09 / 29 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D242594		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
522.07		1963.97		2486.04

<b>C. Full Name (Last, First, Middle Initial)</b> Cathy Calhoun			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 176 Thornberry Lane			Allocated Activity or Event Year-To-Date 833049.18		
City Rensselaer	State NY	Zip Code 12144	Date MM / DD / YYYY 09 / 29 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D242593		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
728.07		2738.91		3466.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1470.33		5531.19		7001.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> CDX Strategic Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1900 South Eads Street, #1210			Allocated Activity or Event Year-To-Date 833049.18		
City Arlington	State VA	Zip Code 22202	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Website			Transaction ID: D241551		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

<b>B. Full Name (Last, First, Middle Initial)</b> Consolidated Edison Company of N.Y. Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address JAF Station P.O. Box 1702			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10116-1702	Date <input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Utilities			Transaction ID: D232937		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
687.60		2586.70		3274.30

<b>C. Full Name (Last, First, Middle Initial)</b> IBF Consulting, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 200 East 36th Street, Suite 6D			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10016	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Computer Consulting			Transaction ID: D239556		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.65		446.35		565.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1121.25		4218.05		5339.30

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> IBF Consulting, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 200 East 36th Street, Suite 6D			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10016	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Computer Consulting			Transaction ID: D239557		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
301.35		1133.65		1435.00

<b>B. Full Name (Last, First, Middle Initial)</b> Isabelle M. Parker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 161 Allen Street, Apt. 2A			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10002	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239514		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.49		1107.85		1402.34

<b>C. Full Name (Last, First, Middle Initial)</b> Isabelle M. Parker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 161 Allen Street, Apt. 2A			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10002	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239516		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.49		1107.85		1402.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
890.33		3349.35		4239.68

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Isabelle M. Parker  
**Mailing Address**  
161 Allen Street, Apt. 2A  
**City** New York **State** NY **Zip Code** 10002  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
833049.18  
**Date** 09 / 29 / 2010  
**Transaction ID:** D239517

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.49		1107.85		1402.34

**B. Full Name (Last, First, Middle Initial)**  
June F. O'Neill  
**Mailing Address**  
75 Pollock Rd.  
**City** Canton **State** NY **Zip Code** 13617  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
833049.18  
**Date** 09 / 01 / 2010  
**Transaction ID:** D239509

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
671.78		2527.17		3198.95

**C. Full Name (Last, First, Middle Initial)**  
June F. O'Neill  
**Mailing Address**  
75 Pollock Rd.  
**City** Canton **State** NY **Zip Code** 13617  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
833049.18  
**Date** 09 / 15 / 2010  
**Transaction ID:** D239510

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
671.78		2527.17		3198.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1638.05		6162.19		7800.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> June F. O'Neill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 75 Pollock Rd.			Allocated Activity or Event Year-To-Date 833049.18		
City Canton	State NY	Zip Code 13617	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239512		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
671.78		2527.17		3198.95

<b>B. Full Name (Last, First, Middle Initial)</b> Leslie Ng			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd			Allocated Activity or Event Year-To-Date 833049.18		
City East Brunswick	State NJ	Zip Code 08816-1103	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239506		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
318.68		1198.82		1517.50

<b>C. Full Name (Last, First, Middle Initial)</b> Leslie Ng			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd			Allocated Activity or Event Year-To-Date 833049.18		
City East Brunswick	State NJ	Zip Code 08816-1103	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239507		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
318.68		1198.82		1517.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1309.14		4924.81		6233.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Leslie Ng			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd			Allocated Activity or Event Year-To-Date 833049.18		
City East Brunswick	State NJ	Zip Code 08816-1103	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 29 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D239508		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
318.68		1198.82		1517.50

<b>B. Full Name (Last, First, Middle Initial)</b> Liisa O'Neill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 22 West 15th Street, #16I			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10011	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 24 / 2010		
Purpose of Disbursement: Web & Online Engagement Consulting Services			Transaction ID: D232936		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1260.00		4740.00		6000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Mallory Ward			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 353 E 83rd Street, Apt. 19G			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10028	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 01 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D239525		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
374.73		1409.70		1784.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1953.41		7348.52		9301.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Mallory Ward			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 353 E 83rd Street, Apt. 19G			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 15 / 2010	
New York	NY	10028		
Purpose of Disbursement: Wages			Transaction ID: D239526	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
374.73		1409.70		1784.43

<b>B. Full Name (Last, First, Middle Initial)</b> Mallory Ward			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 353 E 83rd Street, Apt. 19G			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010	
New York	NY	10028		
Purpose of Disbursement: Wages			Transaction ID: D239527	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
374.73		1409.70		1784.43

<b>C. Full Name (Last, First, Middle Initial)</b> NYSDC Housekeeping Account			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 424 Madison Avenue			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 28 / 2010	
New York	NY	10008		
Purpose of Disbursement: Trxfr of nonfed on offset (See Sch. A)			Transaction ID: D239566	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8413.50		0.00		8413.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9162.96		2819.40		11982.36

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Oxford Health Plans			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1697			Allocated Activity or Event Year-To-Date 833049.18		
City Newark	State NJ	Zip Code 07101-1697	Date <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Health Insurance			Transaction ID: D241523		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
899.61		3384.23		4283.84

<b>B. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 833049.18		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Taxes/Withholdings			Transaction ID: D242543		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.00		519.14		657.14

<b>C. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 833049.18		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Taxes/Withholdings			Transaction ID: D242564		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1475.07		5549.08		7024.15

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2512.68		9452.45		11965.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 833049.18		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Service			Transaction ID: D242574		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.79		112.05		141.84

<b>B. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 833049.18		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Taxes/Withholdings			Transaction ID: D242585		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1613.07		6068.22		7681.29

<b>C. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 833049.18		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Taxes/Withholdings			Transaction ID: D242595		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2598.38		9774.84		12373.22

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4241.24		15955.11		20196.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 232 Commerce Park Drive			Allocated Activity or Event Year-To-Date 833049.18		
City Watertown	State NY	Zip Code 13601	Date <input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Postage Permit Renewal Non-Candidate Specific			Transaction ID: D241516		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

<b>B. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address J A F - Window #76, 421 8th Avenue			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10199-9998	Date <input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Postage Permit Renewal Non-Candidate Specific			Transaction ID: D241518		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

<b>C. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 3576			Allocated Activity or Event Year-To-Date 833049.18		
City Syracuse	State NY	Zip Code 13220-3576	Date <input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Postage Permit Renewal Non-Candidate Specific			Transaction ID: D241515		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.55		438.45		555.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 5640 E. Taft Rd.			Allocated Activity or Event Year-To-Date 833049.18																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D241514			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	2	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	0	2	/	2	0	1	0																
Syracuse	NY	13220																							
Purpose of Disbursement: Post Office Box Fee			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.12		56.88		72.00

<b>B. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 550 Manor Rd			Allocated Activity or Event Year-To-Date 833049.18																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D241517			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	7	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	0	7	/	2	0	1	0																
Staten Island	NY	10314																							
Purpose of Disbursement: Permit Application & Annual Fee Non-Candidate Specific			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.70		292.30		370.00

<b>C. Full Name (Last, First, Middle Initial)</b> Rose Hill Property Association Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address c/o Meringoff Management 30 West 26th Street, 8th Floor			Allocated Activity or Event Year-To-Date 833049.18																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: D239541			M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	4	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
0	9	/	2	4	/	2	0	1	0																
New York	NY	10010-2011																							
Purpose of Disbursement: Office Rent			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6664.14		25069.86		31734.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6756.96		25419.04		32176.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Sandler, Reiff & Young, PC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 M Street, SE, Suite 1102			Allocated Activity or Event Year-To-Date 833049.18		
City Washington	State DC	Zip Code 20003	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Professional Services-Legal			Transaction ID: D239551		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
336.00		1264.00		1600.00

<b>B. Full Name (Last, First, Middle Initial)</b> Sandler, Reiff & Young, PC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 M Street, SE, Suite 1102			Allocated Activity or Event Year-To-Date 833049.18		
City Washington	State DC	Zip Code 20003	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Professional Services-Legal			Transaction ID: D239553		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.00		1580.00		2000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Simon Brandler			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 192 Sackett Street, #4R			Allocated Activity or Event Year-To-Date 833049.18		
City Brooklyn	State NY	Zip Code 11231	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239486		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.71		1676.74		2122.45

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1201.71		4520.74		5722.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Simon Brandler  
**Mailing Address**  
192 Sackett Street, #4R  
**City** Brooklyn **State** NY **Zip Code** 11231  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
833049.18  
**Date** 09 / 15 / 2010  
**Transaction ID:** D239490

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.71		1676.74		2122.45

**B. Full Name (Last, First, Middle Initial)**  
Simon Brandler  
**Mailing Address**  
192 Sackett Street, #4R  
**City** Brooklyn **State** NY **Zip Code** 11231  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
833049.18  
**Date** 09 / 29 / 2010  
**Transaction ID:** D239491

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.71		1676.74		2122.45

**C. Full Name (Last, First, Middle Initial)**  
Staples Credit Plan  
**Mailing Address**  
Dept. 00-02249829, P.O. Box 6721  
**City** The Lakes **State** NV **Zip Code** 88901-6721  
**Purpose of Disbursement:**  
Office Supplies  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
833049.18  
**Date** 09 / 28 / 2010  
**Transaction ID:** D239567

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.87		104.85		132.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
919.29		3458.33		4377.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Tamar Zeilberger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Wall Street			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10005	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239529		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.35		573.11		725.46

<b>B. Full Name (Last, First, Middle Initial)</b> Tamar Zeilberger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Wall Street			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10005	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239530		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.35		573.11		725.46

<b>C. Full Name (Last, First, Middle Initial)</b> Tamar Zeilberger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Wall Street			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10005	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D239531		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.35		573.11		725.46

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
457.05		1719.33		2176.38

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> TriSource Solutions LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5405 Utica Ridge Road, Suite 208			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 02 / 2010 <b>Transaction ID:</b> D239532	
Davenport	IA	52807		
Purpose of Disbursement: Credit Card Fee			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.75		40.44		51.19

<b>B. Full Name (Last, First, Middle Initial)</b> U.S. Postmaster-Hicksville			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 185 W. John Street			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 24 / 2010 <b>Transaction ID:</b> D241553	
Hicksville	NY	11802		
Purpose of Disbursement: Postage Permit Renewal Non-Candidate Specific			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

<b>C. Full Name (Last, First, Middle Initial)</b> U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 170 East Main Street			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 24 / 2010 <b>Transaction ID:</b> D241552	
Patchogue	NY	11772		
Purpose of Disbursement: Postage Permit Renewal Non-Candidate Specific			Category/ Type	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.45		332.74		421.19

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
US Postmaster

Mailing Address  
30 Karner Rd.

City	State	Zip Code
Albany	NY	12288-9998

Purpose of Disbursement:  
Postage Permit Renewal Non-Candidate Specific

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D241554

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

**B. Full Name (Last, First, Middle Initial)**  
Verizon

Mailing Address  
P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement:  
Telephone

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D232933

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.14		591.13		748.27

**C. Full Name (Last, First, Middle Initial)**  
Yaw A. Badu

Mailing Address  
720 Westchester Avenue, #14D

City	State	Zip Code
Bronx	NY	10455

Purpose of Disbursement:  
Office Cleaning

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D232938

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
273.72		1029.72		1303.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
469.71		1767.00		2236.71

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Bartholomew J. Caro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 30 Hartford Lane			Allocated Activity or Event Year-To-Date 833049.18	
City White Plains	State NY	Zip Code 10603	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Expense Reimbursements-see below			Transaction ID: D241591	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="33.00"/>		<input type="text" value="124.15"/>		<input type="text" value="157.15"/>

<b>B. Full Name (Last, First, Middle Initial)</b> 100 William Garage Corp.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 72 John Street			Allocated Activity or Event Year-To-Date 833049.18	
City New York	State NY	Zip Code 10038	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Travel			Transaction ID: D241615	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="5.25"/>		<input type="text" value="19.75"/>		<input type="text" value="25.00"/>

<b>C. Full Name (Last, First, Middle Initial)</b> 475 Parking LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 475 Park Avenue S.			Allocated Activity or Event Year-To-Date 833049.18	
City New York	State NY	Zip Code 10016	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>	
Purpose of Disbursement: Travel			Transaction ID: D241593	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.14"/>		<input type="text" value="26.86"/>		<input type="text" value="34.00"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="33.00"/>		<input type="text" value="124.15"/>		<input type="text" value="157.15"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Bartholomew J. Caro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 30 Hartford Lane			Allocated Activity or Event Year-To-Date 833049.18	
City White Plains	State NY	Zip Code 10603	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 16 / 2010 <b>Transaction ID:</b> D241595	
Purpose of Disbursement: Travel				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.22		19.64		24.86

<b>B. Full Name (Last, First, Middle Initial)</b> E-ZPass			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 149004			Allocated Activity or Event Year-To-Date 833049.18	
City Staten Island	State NY	Zip Code 10314-9004	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 16 / 2010 <b>Transaction ID:</b> D243592	
Purpose of Disbursement: Travel				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.84		14.44		18.28

<b>C. Full Name (Last, First, Middle Initial)</b> Empire Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 314 Fifth Avenue			Allocated Activity or Event Year-To-Date 833049.18	
City New York	State NY	Zip Code 10001	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 16 / 2010 <b>Transaction ID:</b> D241592	
Purpose of Disbursement: Meetings/Meals				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.71		40.30		51.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Unitemized Disbursement Mailing Address City State Zip Code Purpose of Disbursement: Travel Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D241616
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.84"/>		<input type="text" value="3.16"/>		<input type="text" value="4.00"/>

<b>B. Full Name (Last, First, Middle Initial)</b> Charles G. King Mailing Address 10 York Drive City State Zip Code New City NY 10956 Purpose of Disbursement: Expense Reimbursements-see below Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D241617
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="19.53"/>		<input type="text" value="73.47"/>		<input type="text" value="93.00"/>

<b>C. Full Name (Last, First, Middle Initial)</b> Olives Mailing Address 201 Park Avenue South City State Zip Code New York NY 10003 Purpose of Disbursement: Meetings/Meals Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D241618
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="9.24"/>		<input type="text" value="34.76"/>		<input type="text" value="44.00"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="19.53"/>		<input type="text" value="73.47"/>		<input type="text" value="93.00"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Sweets Parking LLC

Mailing Address  
437 Madison Avenue

City State Zip Code  
New York NY 10022

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 09 / 16 / 2010

Transaction ID: D241619

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.29		38.71		49.00

**B.** Full Name (Last, First, Middle Initial)  
June F. O'Neill

Mailing Address  
75 Pollock Rd.

City State Zip Code  
Canton NY 13617

Purpose of Disbursement:  
Expense Reimbursements-see below

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Activity or Event Identifier:  
Administrative

Date 09 / 16 / 2010

Transaction ID: D241620

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.78		96.97		122.75

**C.** Full Name (Last, First, Middle Initial)  
A Better Bite

Mailing Address  
99 Washington Avenue

City State Zip Code  
Albany NY 12210

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 09 / 16 / 2010

Transaction ID: D241629

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.88		3.33		4.21

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.78		96.97		122.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Burger King			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5505 Blue Lagoon Drive			Allocated Activity or Event Year-To-Date 833049.18	
City Blue Lagoon	State FL	Zip Code 33126	Category/ Type	
Purpose of Disbursement: Meetings/Meals			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 09 / 16 / 2010	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D241623	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.90		3.38		4.28

<b>B. Full Name (Last, First, Middle Initial)</b> Dragon Buffet			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1881 Central Avenue			Allocated Activity or Event Year-To-Date 833049.18	
City Albany	State NY	Zip Code 12205	Category/ Type	
Purpose of Disbursement: Meetings/Meals			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 09 / 16 / 2010	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D241626	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.30		19.96		25.26

<b>C. Full Name (Last, First, Middle Initial)</b> Jreck Subs			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 6			Allocated Activity or Event Year-To-Date 833049.18	
City Watertown	State NY	Zip Code 13601	Category/ Type	
Purpose of Disbursement: Meetings/Meals			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 09 / 16 / 2010	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D241627	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.67		6.30		7.97

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
McDonald's Corporation

Mailing Address  
2111 McDonald's Drive

City	State	Zip Code	Category/ Type
Oak Brook	IL	60523	

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D241622

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.11		19.22		24.33

**B. Full Name (Last, First, Middle Initial)**  
NYC Taxi & Limousine Commission

Mailing Address  
40 Rector Street

City	State	Zip Code	Category/ Type
New York	NY	10006	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D241621

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.27		8.53		10.80

**C. Full Name (Last, First, Middle Initial)**  
NYS Office of General Services

Mailing Address  
Bureau of Parking Mgmt 37th Floor, Corning Tower

City	State	Zip Code	Category/ Type
Albany	NY	12242	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D241630

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.80		20.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
NYS Thruway Authority

Mailing Address  
200 Southern Blvd. P.O. Box 189

City Albany State NY Zip Code 12201-0189

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 09 / 16 / 2010  
Transaction ID: D241625

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.84		3.16		4.00

**B. Full Name (Last, First, Middle Initial)**  
Olive Garden

Mailing Address  
178 Wolf Rd.

City Colonie State NY Zip Code 12205

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 09 / 16 / 2010  
Transaction ID: D241628

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.66		10.01		12.67

**C. Full Name (Last, First, Middle Initial)**  
Sbarro

Mailing Address  
401 Broadhollow Rd.

City Melville State NY Zip Code 11747

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 09 / 16 / 2010  
Transaction ID: D241624

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.94		7.29		9.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Alison Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Lexington Avenue, Apt. 4J			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Category/ Type		
New York	NY	10029			
Purpose of Disbursement: Expense Reimbursements-see below			Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative			Transaction ID: D241631		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.38		42.79		54.17

<b>B. Full Name (Last, First, Middle Initial)</b> Bread & Butter Market			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 419 Park Avenue South			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Category/ Type		
New York	NY	10016			
Purpose of Disbursement: Meetings/Meals			Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D241913		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.52		13.25		16.77

<b>C. Full Name (Last, First, Middle Initial)</b> NYC Taxi & Limousine Commission			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 40 Rector Street			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Category/ Type		
New York	NY	10006			
Purpose of Disbursement: Travel			Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D241632		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.85		29.55		37.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.38		42.79		54.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Mallory Ward

Mailing Address  
353 E 83rd Street, Apt. 19G

City	State	Zip Code
New York	NY	10028

Purpose of Disbursement:  
Expense Reimbursements-see below

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D241914

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.18		564.98		715.16

**B. Full Name (Last, First, Middle Initial)**  
Cosi Restaurant

Mailing Address  
461 Park Avenue South

City	State	Zip Code
New York	NY	10010

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D241948

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.73		47.89		60.62

**C. Full Name (Last, First, Middle Initial)**  
Dinosaur BBQ

Mailing Address  
246 W Willow Street

City	State	Zip Code
Syracuse	NY	13202

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D241945

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.51		24.49		31.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.18		564.98		715.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Laughlin's Beef & Barrel

Mailing Address  
333 Franklin Street

City	State	Zip Code	Category/ Type
Buffalo	NY	14202	

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	1	0

  
Transaction ID: D241944

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.20		158.76		200.96

**B. Full Name (Last, First, Middle Initial)**  
Liberty/Yellow Taxi

Mailing Address  
1524 Kenmore Avenue

City	State	Zip Code	Category/ Type
Buffalo	NY	14216	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	1	0

  
Transaction ID: D241916

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.60		40.00

**C. Full Name (Last, First, Middle Initial)**  
MTA Bridges and Tunnels

Mailing Address  
Randalls Island

City	State	Zip Code	Category/ Type
New York	NY	10035-0035	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	1	0

  
Transaction ID: D241915

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.10		7.90		10.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
MTA New York City Transit

Mailing Address  
370 Jay Street

City State Zip Code  
Brooklyn NY 11201-5190

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 09 / 16 / 2010

Transaction ID: D243598

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.76		281.24		356.00

**B. Full Name (Last, First, Middle Initial)**  
P & C Food Market

Mailing Address  
160 Clinton Avenue

City State Zip Code  
Cortland NY 13045

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 09 / 16 / 2010

Transaction ID: D241946

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.48		13.10		16.58

**C. Full Name (Last, First, Middle Initial)**  
Edgar R. Santana

Mailing Address  
1438 Glover Street

City State Zip Code  
Bronx NY 10462

Purpose of Disbursement:  
Expense Reimbursements-see below

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Activity or Event Identifier:  
Administrative

Date 09 / 15 / 2010

Transaction ID: D241979

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
724.27		2724.64		3448.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
724.27		2724.64		3448.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
475 Parking LLC

Mailing Address  
475 Park Avenue S.

City	State	Zip Code	Category/ Type
New York	NY	10016	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	1	0

  
**Transaction ID:** D242021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.48		701.52		888.00

**B. Full Name (Last, First, Middle Initial)**  
Apple Foods

Mailing Address  
340 Main Street

City	State	Zip Code	Category/ Type
Middleburgh	NY	12122	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	1	0

  
**Transaction ID:** D242132

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.30		23.71		30.01

**C. Full Name (Last, First, Middle Initial)**  
BP

Mailing Address  
28100 Torch Parkway

City	State	Zip Code	Category/ Type
Warrenville	IL	60555	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	1	0

  
**Transaction ID:** D242040

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.76		44.24		56.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Delaware River Joint Toll Bridge Commission

Mailing Address  
PO Box 189

City Delaware Water Gap	State PA	Zip Code 18327	Category/ Type
Purpose of Disbursement: Travel			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D242042

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.16		0.59		0.75

**B. Full Name (Last, First, Middle Initial)**  
Duane Reade

Mailing Address  
1191 2nd Avenue

City New York	State NY	Zip Code 10021	Category/ Type
Purpose of Disbursement: Meetings/Meals			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D242110

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.53		13.26		16.79

**C. Full Name (Last, First, Middle Initial)**  
Dunkin' Donuts

Mailing Address  
132 Tuckahoe Rd.

City Yonkers	State NY	Zip Code 10701	Category/ Type
Purpose of Disbursement: Meetings/Meals			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D242088

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.72		6.46		8.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Eata Pita			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 441 Park Avenue South			Allocated Activity or Event Year-To-Date 833049.18																	
City	State	Zip Code	Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	0	9	D	D	1	5	Y	Y	Y	Y	2	0	1	0
M	M																			
0	9																			
D	D																			
1	5																			
Y	Y	Y	Y																	
2	0	1	0																	
New York	NY	10016	Transaction ID: D242058																	
Purpose of Disbursement: Meetings/Meals			Category/ Type																	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.24		19.71		24.95

<b>B. Full Name (Last, First, Middle Initial)</b> Frank and Teressa's Anchor Bar & Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 1047 Main Street			Allocated Activity or Event Year-To-Date 833049.18																	
City	State	Zip Code	Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	0	9	D	D	1	5	Y	Y	Y	Y	2	0	1	0
M	M																			
0	9																			
D	D																			
1	5																			
Y	Y	Y	Y																	
2	0	1	0																	
Buffalo	NY	14209	Transaction ID: D242036																	
Purpose of Disbursement: Meetings/Meals			Category/ Type																	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.03		79.11		100.14

<b>C. Full Name (Last, First, Middle Initial)</b> Getty			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																	
Mailing Address 501 Grand Avenue			Allocated Activity or Event Year-To-Date 833049.18																	
City	State	Zip Code	Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>5</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>		M	M	0	9	D	D	1	5	Y	Y	Y	Y	2	0	1	0
M	M																			
0	9																			
D	D																			
1	5																			
Y	Y	Y	Y																	
2	0	1	0																	
Englewood	NJ	07631	Transaction ID: D242078																	
Purpose of Disbursement: Travel			Category/ Type																	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>																				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.02		48.98		62.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Holiday Inn Waterloo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2468 State Route 414			Allocated Activity or Event Year-To-Date 833049.18	
City Waterloo	State NY	Zip Code 13165	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 09 / 15 / 2010 <b>Transaction ID:</b> D242119	
Purpose of Disbursement: Travel				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.66		326.02		412.68

<b>B. Full Name (Last, First, Middle Initial)</b> Impark			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 121 West 125th Street			Allocated Activity or Event Year-To-Date 833049.18	
City New York	State NY	Zip Code 10027	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 09 / 15 / 2010 <b>Transaction ID:</b> D242128	
Purpose of Disbursement: Travel				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.73		10.27		13.00

<b>C. Full Name (Last, First, Middle Initial)</b> Joe's Place Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1841 Westchester Avenue			Allocated Activity or Event Year-To-Date 833049.18	
City Bronx	State NY	Zip Code 10472	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 09 / 15 / 2010 <b>Transaction ID:</b> D242062	
Purpose of Disbursement: Meetings/Meals				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.39		16.51		20.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Laughlin's Beef & Barrel

Mailing Address  
333 Franklin Street

City	State	Zip Code	Category/ Type
Buffalo	NY	14202	

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 09 / 15 / 2010

Transaction ID: D242043

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.27		245.56		310.83

**B. Full Name (Last, First, Middle Initial)**  
Mikey's Gas Mart Inc

Mailing Address  
1 Wayland Street

City	State	Zip Code	Category/ Type
Atlanta	NY	14808	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 09 / 15 / 2010

Transaction ID: D242112

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.87		37.13		47.00

**C. Full Name (Last, First, Middle Initial)**  
Mobil

Mailing Address  
5959 Las Colinas Blvd.

City	State	Zip Code	Category/ Type
Irving	TX	75039-2298	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 09 / 15 / 2010

Transaction ID: D242055

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.71		277.30		351.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
MTA Bridges and Tunnels

Mailing Address  
Randalls Island

City	State	Zip Code	Category/ Type
New York	NY	10035-0035	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	1	0

  
**Transaction ID:** D242065

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.44		50.56		64.00

**B. Full Name (Last, First, Middle Initial)**  
New Jersey Turnpike Authority

Mailing Address  
P.O. Box 5042

City	State	Zip Code	Category/ Type
Woodbridge	NJ	07095-5042	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	1	0

  
**Transaction ID:** D243599

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.21		0.79		1.00

**C. Full Name (Last, First, Middle Initial)**  
NYC DOT-Bureau of Parking

Mailing Address  
55 Water Street

City	State	Zip Code	Category/ Type
New York	NY	10041	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	1	0

  
**Transaction ID:** D242101

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.32		1.18		1.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
NYC Taxi & Limousine Commission

Mailing Address  
40 Rector Street

City	State	Zip Code
New York	NY	10006

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D242017

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.04		71.65		90.69

**B. Full Name (Last, First, Middle Initial)**  
NYS Thruway Authority

Mailing Address  
200 Southern Blvd. P.O. Box 189

City	State	Zip Code
Albany	NY	12201-0189

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D242027

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.70		51.55		65.25

**C. Full Name (Last, First, Middle Initial)**  
P.S. 450 Restaurant

Mailing Address  
450 Park Avenue South

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
833049.18

Date  /  /   
**Transaction ID:** D242144

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.76		44.24		56.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Potter Mens Shop			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1239 Castle Hill Avenue			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Bronx	NY	10462	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Shirts			Transaction ID: D242054		
Activity or Event Identifier: Administrative [MEMO ITEM]			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: D242054		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.17		53.33		67.50

<b>B. Full Name (Last, First, Middle Initial)</b> Quik Park Southern LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 New York Plaza			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
New York	NY	10004	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Travel			Transaction ID: D242123		
Activity or Event Identifier: Administrative [MEMO ITEM]			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: D242123		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.83		18.17		23.00

<b>C. Full Name (Last, First, Middle Initial)</b> Shell			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2463			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Houston	TX	77252	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Travel			Transaction ID: D242068		
Activity or Event Identifier: Administrative [MEMO ITEM]			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Transaction ID: D242068		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.26		64.91		82.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Subway Mailing Address 210 W. Genesee Street City State Zip Code Syracuse NY 13202 Purpose of Disbursement: Meetings/Meals Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 833049.18 Date MM / DD / YYYY 09 / 15 / 2010 <b>Transaction ID:</b> D242049
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.80		6.79		8.59

<b>B. Full Name (Last, First, Middle Initial)</b> Sunoco Mailing Address 1735 Market Street, Ste LL City State Zip Code Mid City West PA 19103-3758 Purpose of Disbursement: Travel Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 833049.18 Date MM / DD / YYYY 09 / 15 / 2010 <b>Transaction ID:</b> D242033
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.06		319.97		405.03

<b>C. Full Name (Last, First, Middle Initial)</b> The Port Authority of NY & NJ Mailing Address 225 Park Avenue South City State Zip Code New York NY 10003 Purpose of Disbursement: Travel Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 833049.18 Date MM / DD / YYYY 09 / 15 / 2010 <b>Transaction ID:</b> D242025
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.08		37.92		48.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Walgreens

Mailing Address  
1230 Nepperhan Avenue

City State Zip Code  
Yonkers NY 10703

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 15 / 2010

Transaction ID: D242083

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.82		3.08		3.90

**B. Full Name (Last, First, Middle Initial)**  
Wildflower Cafe

Mailing Address  
301 North Franklin Street

City State Zip Code  
Watkins Glen NY 14891

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 15 / 2010

Transaction ID: D242114

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.66		126.62		160.28

**C. Full Name (Last, First, Middle Initial)**  
Wine:30

Mailing Address  
41 East 30th Street

City State Zip Code  
New York NY 10016

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 15 / 2010

Transaction ID: D242080

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.25		23.51		29.76

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 833049.18		
City Newark	State NJ	Zip Code 07101-1270	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Credit Card Payment-see below			Transaction ID: D242149		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2674.40		10060.82		12735.22

<b>B. Full Name (Last, First, Middle Initial)</b> 1025 Ruyi Japanese Steak House			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1025 Arsenal Street			Allocated Activity or Event Year-To-Date 833049.18		
City Watertown	State NY	Zip Code 13601	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Meetings/Meals			Transaction ID: D242168		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.66		10.03		12.69

<b>C. Full Name (Last, First, Middle Initial)</b> A-06 Beers of the World			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10701 Lambert Field			Allocated Activity or Event Year-To-Date 833049.18		
City Saint Louis	State MO	Zip Code 63145	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Meetings/Meals			Transaction ID: D242187		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.10		11.65		14.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2674.40		10060.82		12735.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Abitinos Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 733 2nd Avenue			Allocated Activity or Event Year-To-Date 833049.18		
City New York	State NY	Zip Code 10016	Date MM / DD / YYYY 09 / 29 / 2010		
Purpose of Disbursement: Meetings/Meals			Transaction ID: D242184		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.00		71.47		90.47

<b>B. Full Name (Last, First, Middle Initial)</b> All Right Central Parking Airport			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1000 Col Eileen Collins Blvd.			Allocated Activity or Event Year-To-Date 833049.18		
City Syracuse	State NY	Zip Code 13212	Date MM / DD / YYYY 09 / 29 / 2010		
Purpose of Disbursement: Travel			Transaction ID: D242164		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.60		40.00

<b>C. Full Name (Last, First, Middle Initial)</b> Apple Web Store			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12545 Riata Vista Circle			Allocated Activity or Event Year-To-Date 833049.18		
City Austin	State TX	Zip Code 78727-6524	Date MM / DD / YYYY 09 / 29 / 2010		
Purpose of Disbursement: Computer Supplies			Transaction ID: D242150		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.22		4.57		5.79

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Applebee's

Mailing Address  
628 S Main Street

City State Zip Code  
Syracuse NY 13212

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date  /  /

Transaction ID: D242169

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1.85"/>		<input type="text" value="6.94"/>		<input type="text" value="8.79"/>

**B. Full Name (Last, First, Middle Initial)**  
Black Box Network Services

Mailing Address  
21398 Network Place

City State Zip Code  
Chicago IL 60673

Purpose of Disbursement:  
Telephone Maintenance

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date  /  /

Transaction ID: D242181

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="456.13"/>		<input type="text" value="1715.93"/>		<input type="text" value="2172.06"/>

**C. Full Name (Last, First, Middle Initial)**  
CITGO Oil Co.

Mailing Address  
6100 S Yale Avenue

City State Zip Code  
Tulsa OK 74136-1905

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date  /  /

Transaction ID: D242156

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="10.00"/>		<input type="text" value="37.64"/>		<input type="text" value="47.64"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Continental Electronic Ticketing			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 600 Jefferson Street			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010	
Houston	TX	77002		
Purpose of Disbursement: Travel			Transaction ID: D242153	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.42		306.28		387.70

<b>B. Full Name (Last, First, Middle Initial)</b> Deer Park Spring Water Co.			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 856192			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010	
Louisville	KY	40285-6192		
Purpose of Disbursement: Water Cooler Rental & Beverage			Transaction ID: D242177	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		78.99		99.99

<b>C. Full Name (Last, First, Middle Initial)</b> eFax.com			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6922 Hollywood Blvd., # 800			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010	
Los Angeles	CA	90028-6154		
Purpose of Disbursement: Internet Access			Transaction ID: D242178	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.96		44.99		56.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Empire Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 314 Fifth Avenue			Allocated Activity or Event Year-To-Date 833049.18	
City New York	State NY	Zip Code 10001	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010 <b>Transaction ID:</b> D242183	
Purpose of Disbursement: Meetings/Meals				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.84		37.00		46.84

<b>B. Full Name (Last, First, Middle Initial)</b> Enterprise Rent-A-Car			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6805 State Highway 56			Allocated Activity or Event Year-To-Date 833049.18	
City Potsdam	State NY	Zip Code 13676	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010 <b>Transaction ID:</b> D242154	
Purpose of Disbursement: Travel				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.22		809.62		1024.84

<b>C. Full Name (Last, First, Middle Initial)</b> Fresno's North Syracuse			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3920 Brewerton Rd			Allocated Activity or Event Year-To-Date 833049.18	
City Syracuse	State NY	Zip Code 13212	Date <span style="font-size: small;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010 <b>Transaction ID:</b> D242160	
Purpose of Disbursement: Meetings/Meals				
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.12		11.75		14.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Getty

Mailing Address  
3775 Main Street

City	State	Zip Code
Warrensburg	NY	12885

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date  /  /

Transaction ID: D242173

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.12		56.88		72.00

**B. Full Name (Last, First, Middle Initial)**  
Hampton Inn

Mailing Address  
26 River Street

City	State	Zip Code
Cortland	NY	13045

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date  /  /

Transaction ID: D242159

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.69		111.68		141.37

**C. Full Name (Last, First, Middle Initial)**  
Hess Corporation

Mailing Address  
1185 Avenue of the Americas

City	State	Zip Code
New York	NY	10036

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date  /  /

Transaction ID: D242157

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.61		24.89		31.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Holiday Inn Express Syracuse

Mailing Address  
5418 S Bay Rd

City State Zip Code  
Syracuse NY 13212-3801

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 29 / 2010

Transaction ID: D242161

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.04		173.18		219.22

**B. Full Name (Last, First, Middle Initial)**  
Holiday Inn Express

Mailing Address  
1442 Western Avenue

City State Zip Code  
Albany NY 12203

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 29 / 2010

Transaction ID: D242172

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.67		198.13		250.80

**C. Full Name (Last, First, Middle Initial)**  
Holiday Inn Waterloo

Mailing Address  
2468 State Route 414

City State Zip Code  
Waterloo NY 13165

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 29 / 2010

Transaction ID: D242171

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.58		487.46		617.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Holiday Inn

Mailing Address  
308 N Comrie Avenue

City State Zip Code  
Johnstown NY 12095

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: D242155

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.24		151.40		191.64

**B. Full Name (Last, First, Middle Initial)**  
Hostgator.com LLC

Mailing Address  
11251 Northwest Freeway, Suite 400

City State Zip Code  
Houston TX 77092

Purpose of Disbursement:  
Website

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: D242170

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.49		39.46		49.95

**C. Full Name (Last, First, Middle Initial)**  
Hotels.com US

Mailing Address  
333 108th Avenue NE

City State Zip Code  
Bellevue WA 98004

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date MM / DD / YYYY  
09 / 29 / 2010

Transaction ID: D242162

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.95		684.49		866.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Houlihan's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 147 Saint Louis Union Station			Allocated Activity or Event Year-To-Date 833049.18		
City Saint Louis	State MO	Zip Code 63103	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 29 / 2010		
Purpose of Disbursement: Meetings/Meals			Transaction ID: D242167		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.52		17.02		21.54

<b>B. Full Name (Last, First, Middle Initial)</b> Hyatt Regency Buffalo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2 Fountain Plaza			Allocated Activity or Event Year-To-Date 833049.18		
City Buffalo	State NY	Zip Code 14202	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 29 / 2010		
Purpose of Disbursement: Travel			Transaction ID: D242152		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.34		163.03		206.37

<b>C. Full Name (Last, First, Middle Initial)</b> Intermedia.net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 150 Mathilda Place, Suite 104			Allocated Activity or Event Year-To-Date 833049.18		
City Sunnyvale	State CA	Zip Code 94086	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 09 / 29 / 2010		
Purpose of Disbursement: Computer Server Hosting			Transaction ID: D242174		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.26		471.23		596.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Jetblue Airways

Mailing Address  
P.O. Box 17435

City State Zip Code  
Salt Lake City UT 84117-7435

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 29 / 2010

Transaction ID: D242151

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
182.81		687.69		870.50

**B. Full Name (Last, First, Middle Initial)**  
Landry's

Mailing Address  
1820 Market Street

City State Zip Code  
Saint Louis MO 63103

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 29 / 2010

Transaction ID: D242165

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.11		34.28		43.39

**C. Full Name (Last, First, Middle Initial)**  
Marriott St. Louis

Mailing Address  
One St. Louis Union Station

City State Zip Code  
Saint Louis MO 63103

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

833049.18

Date 09 / 29 / 2010

Transaction ID: D242163

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.22		316.85		401.07

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Mullin's Catering			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1230 US Highway 11			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Category/ Type	
Gouverneur	NY	13642		
Purpose of Disbursement: Meetings/Meals			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D242175	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.20		8.28		10.48

<b>B. Full Name (Last, First, Middle Initial)</b> NYC Gourmet Deli			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 284 Genesee Street			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Category/ Type	
Utica	NY	13502		
Purpose of Disbursement: Meetings/Meals			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D242158	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.31		12.47		15.78

<b>C. Full Name (Last, First, Middle Initial)</b> OK Office Products Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 90 State Street			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Category/ Type	
Albany	NY	12207		
Purpose of Disbursement: Office Supplies			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010	
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: D242179	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
530.91		1997.23		2528.14

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Ramada Inn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2 River Street			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010 <b>Transaction ID:</b> D242185	
Cortland	NY	13045		
Purpose of Disbursement: Travel			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.85		52.09		65.94

<b>B. Full Name (Last, First, Middle Initial)</b> The Clam Bar			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3914 Brewerton Rd.			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010 <b>Transaction ID:</b> D242200	
North Syracuse	NY	13212		
Purpose of Disbursement: Meetings/Meals			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.76		51.78		65.54

<b>C. Full Name (Last, First, Middle Initial)</b> The Restaurant at Italian			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 257 Washington Avenue Ext.			Allocated Activity or Event Year-To-Date 833049.18	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 29 / 2010 <b>Transaction ID:</b> D242176	
Albany	NY	12205-5504		
Purpose of Disbursement: Meetings/Meals			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.67		21.33		27.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Transbeam			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 20 West 36th Street, 2nd Floor			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D242182		
New York	NY	10018			
Purpose of Disbursement: Internet Access			Category/ Type		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.76		608.54		770.30

<b>B. Full Name (Last, First, Middle Initial)</b> US Airways			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4000 E Sky Harbor Blvd.			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D242166		
Phoenix	AZ	85034			
Purpose of Disbursement: Travel			Category/ Type		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.22		478.58		605.80

<b>C. Full Name (Last, First, Middle Initial)</b> Whirlpool Appliances			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 553 Benson Rd.			Allocated Activity or Event Year-To-Date 833049.18		
City	State	Zip Code	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D242180		
Benton Harbor	MI	49022			
Purpose of Disbursement: Refrigerator Filters			Category/ Type		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.14		34.40		43.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
39658.11	117539.05	157197.16

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: **SchedL1**

NAME OF COMMITTEE (In Full) New York State Democratic Committee
NAME OF ACCOUNT Levin account

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	189.58	189.58
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	189.58	189.58
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	189.58	189.58